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## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) 591 REDWOOD HWY., #4000 ADDRESS (number and street) Check if different than previously MILL VALLEY CA 94941 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00384362 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Oct 20 (M10) Jul 20 (M7) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 12 0 1 2007 12 3 1 2007 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. JASON D. KAUNE Type or Print Name of Treasurer Electronically Filed by JASON D. KAUNE 0 1 25 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

F	eport Covering the Period: From:	01 2007	To: 12 31 Y Y Y
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
	(a) Cash on Hand January 1		197543.58
	(b) Cash on Hand at Begining of Reporting Period	307315.81	
	(c) Total Receipts (from Line 19)	43662.97	548124.38
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	350978.78	745667.96
	Total Disbursements (from Line 31)	48250.00	442939.18
	Cash on Hand at Close of		
	Reporting Period (subtract Line 7 from Line 6(d))	302728.78	302728.78
	Debts and Obligations owed TO		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
).	Debts and Obligations owed BY		
	the committee (Itemize all on Schedule C and/or Schedule D)	2026.50	

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

## DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)

Report Covering the Period: From:	1 2 0 1 2 0 0 7 T	To: 12 31 2007
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ul><li>11. Contributions (other than loans) From:</li><li>(a) Individuals/Persons Other</li></ul>		
Than Political Committees (i) Itemized (use Schedule A)	40340.69	473103.84
(ii) Unitemized	3212.50	74020.47
(iii) TOTAL (add Lines 11(a)(i) and (ii)	43553.19	547124.31
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	43553.19	547124.31
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
<ul><li>14. Loan Repayments Received</li><li>15. Offsets To Operating Expenditures</li></ul>	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	109.78	1000.07
18. Transfers from Non-Federal and Levin Fund	ds	
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	43662.97	548124.38
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	43662.97	548124.38

### **DETAILED SUMMARY PAGE**

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share		
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating  Expenditures	0.00	1789.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	0.00	1789.18
Transfers to Affiliated/Other Party		
CommitteesContributions to	0.00	0.00
Federal Candidates/Committeesand Other Political Committees	11000.00	296500.00
Independent Expenditure (use Schedule E)	0.00	0.00
Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To:  (a) Individuals/Persons Other Than Political Committees	0.00	0.00
man Folitical Committees		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	. 0.00	0.00
(d) Total Contribution Refunds	0.00	0.00
(add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements	37250.00	144650.00
Federal Election Activity (2 U.S.C 431(20) (a) Shared Federal Election Activity	))	
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	0.00	0.00
With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 2		440000 40
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	48250.00	442939.18
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	48250.00	442939.18
Hom Line 31)	40200.00	442303.10

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) Line 11(d), page 3)	43553.19	547124.31
 Contribution Refunds  Line 28(d))	0.00	0.00
Contributions (other than loans) tract Line 34 from Line 33)	43553.19	547124.31
Federal Operating Expenditures Line 21(a)(i) and Line 21(b))	0.00	1789.18
ets to Operating Expenditures  Line 15, page 3)	0.00	0.00
Operating Expenditures  stract Line 37 from Line 36)	0.00	1789.18

FE6AN026

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 6/310   (check only one)     X   11a
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS MARIA ANDERSON			Date of Receipt
Mailing Address 4605 W SUNSET	BLVD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TAMPA	State FL	Zip Code 33629	Transaction ID: INC.A.42351
FEC ID number of contributing federal political committee.	C	33029	Amount of Each Receipt this Period  5.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CUS		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) MR DAVID BAUGH	<b>.</b>		Date of Receipt
Mailing Address 1813 ADONIS AVE	Ē		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City HENDERSON	State NV	Zip Code 89074	Transaction ID: INC.A.42442  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	03074	23.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MGR BE	n NEFIT DELIVERY SYSTEM	<u> </u>
Receipt For:  Primary  General  Other (specify) ▼		Year-to-Date ▼ 1042.00	
Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO			Date of Receipt
Mailing Address 26 DAYLILY DRIV	E		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City MOUNT LAUREL	State NJ	Zip Code 08054	Transaction ID: INC.A.42494  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00034	15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	n	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 555.00	
SUBTOTAL of Receipts This Page (option	al)		43.00

## SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7/310 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	statements may not be sold or used by any personame and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX Mailing Address 3380 SADDLEBROOK  City LAS VEGAS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NV 89141  C  Occupation DIR PHARM PRACTICE  Aggregate Year-to-Date   1300.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 0 7  Transaction ID: INC.A.42082  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR JASON COLE Mailing Address 14917 E BELLA VISTA  City VERADALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code WA 99037  C  Occupation DIR PHARM PRACTICE Aggregate Year-to-Date  400.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR KENNETH DANIELS Mailing Address 2903 CHUKKAR COU  City PLANT CITY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	RT  State Zip Code FL 33567  C  Occupation VP/GM  Aggregate Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number	·	60.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC.  Full Name (Last, First, Middle Initial) MR WILLIS DINGLE	POLITICAL A	ACTION COMMITTEE (a.k.a	, 
Mailing Address 17826 ARBOR GREI			Date of Receipt  1 2 0 1 2 0 0 7
City <u>TAMPA</u>	State FL	Zip Code 33647	Transaction ID: INC.A.42180  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR H		
Receipt For:  Primary  General  Other (specify) ▼		Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MS GEORGIA EDDLEMAN			Date of Receipt
Mailing Address 908 EDGEMEER LA	NE		12 01 2007
City	State	Zip Code	Transaction ID: INC.A.42424
SOUTHLAKE FEC ID number of contributing	C	76092	Amount of Each Receipt this Period  34.45
federal political committee.			
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For:  Primary General	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1791.40	
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO			Date of Receipt
Mailing Address 9 GREEN HILL TRAI	L		12 01 2007
City	State	Zip Code	Transaction ID: INC.A.42317
TROPHY CLUB  FEC ID number of contributing federal political committee.	C	76262	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 2600.00	
SUBTOTAL of Receipts This Page (optional)			109.45

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 9/310   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL <i>F</i>	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ROBERT GIBBS			Date of Receipt
Mailing Address 544 DENMOOR Co	OURT		M M / D D / Y Y Y Y Y 1 1 2 0 1 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42122
GALLOWAY  FEC ID number of contributing federal political committee.	OH C	43119	Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n RM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR J. HOLLINGER			Date of Receipt
Mailing Address 784 CAPE HENRY DR			1 2 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City COLUMBUS	State OH	Zip Code 43228	Transaction ID: INC.A.42301  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	TOLLO	4.17
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n INESS PLANNING	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 216.84	
Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt
Mailing Address 12 WADE HAMPTON TRAIL			1 2 0 1 2 0 0 7
City HENDERSON	State NV	Zip Code 89052	Transaction ID: INC.A.42374
FEC ID number of contributing federal political committee.	C	09032	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 863.52	
SUBTOTAL of Receipts This Page (options	al)	<b>\</b>	41.67

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 310 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	the name and add	lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC	. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ROSS LUCE			Date of Receipt
Mailing Address 1066 WEST GROVE		7in Code	1 2 0 1 2 0 0 7 2 0 0 7
City GIBSONIA	State PA	Zip Code 15044	Transaction ID: INC.A.42175  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	13044	15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	١	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 780.00	
Full Name (Last, First, Middle Initial) MR GILBERT RAINES Mailing Address 800 SANDY TRAIL			Date of Receipt  1 2 0 1 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42457
KELLER FEC ID number of contributing federal political committee.	C	76248	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 610.00	
Full Name (Last, First, Middle Initial) MRS MONICA REED			Date of Receipt
Mailing Address 8475 DUNHAM STA	TION DRIVE		12 01 2007
City	State	Zip Code	Transaction ID: INC.A.42261
TAMPA	FL	33647	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n RM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (optional)	)		65.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 310 (check only one)    X
or for commercial purposes, other than usin	and Statements may not be sold or used by any person of the name and address of any political committee to the NC. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR FRANK SCHULTE Mailing Address 2121 AMERICA'S	CUP CIR	Date of Receipt
City LAS VEGAS	State Zip Code NV 89117	Transaction ID: INC.A.42197  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	25.00
Receipt For: Primary General Other (specify)	REGIONAL VP PHARMACIES  Aggregate Year-to-Date ▼  1300.00	
Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 266 BRUSHY CRI	EEK AVE	Date of Receipt    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.42277
LAS VEGAS	NV 89148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2065.45	
Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE		Date of Receipt
Mailing Address 21625 E. MERIW	12 01 2007	
City LIBERTY LAKE	State Zip Code WA 99019	Transaction ID: INC.A.42305  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 33010	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 737.50	
SURTOTAL of Receipts This Page (option	nal)	95.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 310 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT Mailing Address 8362 GOLDEN PRA  City TAMPA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State FL  C  Occupation VP/GM	Zip Code 33647 n	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR LARRY THOMAS Mailing Address 3915 SILKWOOD T  City ARLINGTON	TRAIL State TX	Zip Code 76016	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)		n NG PHARMACIST e Year-to-Date ▼	4.41
Full Name (Last, First, Middle Initial) MR TIMOTHY TIDD Mailing Address 7974 FLAMETREE  City LAS VEGAS  FEC ID number of contributing federal political committee.	State NV	Zip Code 89123	Date of Receipt    M M M
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP/GM Aggregate	Year-to-Date ▼ 1062.50	
SUBTOTAL of Receipts This Page (optional	(l	·····	79.41

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 310 (check only one)    X   11a		
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any pe name and address of any political committee	person for the purpose of soliciting contributions see to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COMMITTEE (a	.k.a. Medco Health PAC)		
Full Name (Last, First, Middle Initial)  MR HECTOR TORRES		Date of Receipt		
Mailing Address 6023 HOMESTEAD C	COURT State Zip Code	1 2 0 1 2 0 0 7  Transaction ID: INC.A.42307		
HILLIARD	OH 43026	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	4.28		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SUPV INVENTORY CONTROL			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  222.56			
Full Name (Last, First, Middle Initial)  MR CALVIN WASDYKE	Date of Receipt			
Mailing Address 5 APPLE ORCHARD	12 01 2007			
City	State Zip Code	Transaction ID: INC.A.42289		
MOORESTOWN	NJ 08057	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	912.50			
Full Name (Last, First, Middle Initial)  MS LESLIE ACHTER				
Mailing Address 821 ALBEMARLE ST	Mailing Address 821 ALBEMARLE STREET			
City	State Zip Code	Transaction ID: INC.A.42174		
WYCKOFF FEC ID number of contributing	NJ 07481	Amount of Each Receipt this Period		
federal political committee.	C	25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR ANALYTICAL SVCS			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	650.00			
SUBTOTAL of Receipts This Page (optional) .	1	79.28		
TOTAL This Period (last page this line numbe				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of saliciting contributions from for for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  In Name (Last, First, Middle Initial)  Mailing Address 1021 SUNSET RIDGE  City State Zip Code BRIDGEWATER NJ 08897  FEU ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Office (specify) ▼  If Name (Last, First, Middle Initial)  Date of Receipt Ny PHARM CONTRACT & CONSULTING  Receipt For: Primary General Occupation Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Occupation Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Occupation Name of Employer General Office (specify) ▼  If Name (Last, First, Middle Initial)  Date of Receipt Ny PHARM CONTRACT & CONSULTING  Date of Receipt Ny PY Date Office (specify) ▼  State Zip Code Ny Date Ny Date Ny Date Office Ny PY Date Ny Date Office Ny PY Date Ny PY Da	SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16
Full Name (Last, First, Middle Initial) MR EDWARD ADAMCIK Mailing Address 1021 SUNSET RIDGE  City BRIDGEWATER NJ 08807 FEC ID number of contributing federal political committee.  Name of Employer Primary General Other (specify) ▼  If I Name (Last, First, Middle Initial) DIANE ADAMS Mailing Address 34 THOMAS ST.  City State Zip Code NJ 07006  FULl Name (Last, First, Middle Initial) DIANE ADAMS Mailing Address 34 THOMAS ST.  City State Zip Code NJ 07006  FEC ID number of contributing federal political committiee.  C  Cupation VP PHARM CONTRACT 8 CONSULTI NG Aggregate Year-to-Date ▼  I 1300.00  Date of Receipt  Transaction ID: INC.A 42488 Amount of Each Receipt this Period  C 25.00  Transaction ID: INC.A 42488 Amount of Each Receipt this Period  Transaction ID: INC.A 42488  Amount of Each Receipt this Period  C 25.00  Date of Receipt  Transaction ID: INC.A 42488  Amount of Each Receipt this Period  Transaction ID: INC.A 42488  Amount of Each Receipt this Period  Transaction ID: INC.A 42488  Amount of Each Receipt this Period  Transaction ID: INC.A 42488  Amount of Each Receipt this Period  Transaction ID: INC.A 42488  Amount of Each Receipt this Period  Transaction ID: INC.A 42173  Amount of Each Receipt this Period  Transaction ID: INC.A 42173  Amount of Each Receipt this Period  FEC ID number of contributing footeral political committee.  Name of Employer WARWICK  NY 10890  FEC ID number of contributing footeral political committee.  Perimary General Other (specify) ▼  Aggregate Year-to-Date ▼  Transaction ID: INC.A 42173  Amount of Each Receipt this Period  Transaction ID: INC.A 42173  Amount of Each Receipt this Period  Transaction ID: INC.A 42173  Amount of Each Receipt this Period  Transaction ID: INC.A 42173  Amount of Each Receipt this Period  Transaction ID: INC.A 42173  Amount of Each Receipt this Period  Transaction ID: INC.A 42173  Amount of Each Receipt this Period  Transaction ID: INC.A 42173  Amount of Each Receipt this Period  Transaction ID: INC.A 42173  Amount of Each Receipt this Period  Transa	or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
BRIDGEWATER   NJ 08807	Full Name (Last, First, Middle Initial) MR EDWARD ADAMCIK Mailing Address 1021 SUNSET RID	GE	Date of Receipt  1 2 0 8 2 0 0 7
MEDCO HEALTH SOLUTIONS    Receipt For:	BRIDGEWATER FEC ID number of contributing	NJ 08807	Amount of Each Receipt this Period
DIANE ADAMS  Mailing Address 34 THOMAS ST.  City  CALDWELL  NJ  07006  FEC ID number of contributing federal political committee.  Name of Employer  WARWICK  NY  10990  Primary  NAME of Employer  MEDCO HEALTH SOLUTIONS  State  Zip Code  NJ  07006  CC  171 Transaction ID: INC.A.42488  Amount of Each Receipt this Period  25.00  Aggregate Year-to-Date ▼  125.00  Date of Receipt  12 0 8 / 2 0 0 7  Transaction ID: INC.A.42488  Amount of Each Receipt this Period  25.00  Date of Receipt  12 0 8 / 2 0 0 7  Transaction ID: INC.A.42488  Amount of Each Receipt this Period  Date of Receipt  12 0 8 / 2 0 0 7  Transaction ID: INC.A.42173  Amount of Each Receipt this Period  Date of Receipt  12 0 8 / 2 0 0 7  Transaction ID: INC.A.42173  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  NY  10990  FEC ID number of contributing federal political committee.  NY  10990  Receipt For:  Primary  General  Other (specify) ▼  1300.00	Receipt For: Primary General	VP PHARM CONTRACT & CONSULT Aggregate Year-to-Date ▼	TING
City State Zip Code NJ 07006  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary State NY 10990  Full Name (Last, First, Middle Initial)  FIUI Name (Last, First, Middle Initial)  MR STEPHEN ADLER  Mailing Address 139 BELLVALE LAKES RD  City State Zip Code NY 10990  FEC ID number of contributing federal political committee.  NY 10990  Receipt For: Occupation State	DIANE ADAMS		M M / D D / Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR STEPHEN ADLER  Mailing Address 139 BELLVALE LAKES RD  City State Zip Code WARWICK NY 10990  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Occupation VP INFO TECHNOLOGY  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: INC.A.42173  Amount of Each Receipt this Period  Solution VP INFO TECHNOLOGY  Aggregate Year-to-Date ▼  1300.00	CALDWELL		Transaction ID: INC.A.42488
Receipt For:	federal political committee.	Occupation	
MR STEPHEN ADLER  Mailing Address 139 BELLVALE LAKES RD  City State Zip Code WARWICK NY 10990  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Date of Receipt  Transaction ID: INC.A.42173  Amount of Each Receipt this Period  50.00	Receipt For: Primary General	Aggregate Year-to-Date ▼	
WARWICK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Amount of Each Receipt this Period  50.00  C  Aggregate Year-to-Date ▼  1300.00	MR STEPHEN ADLER	KES RD	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)   Occupation VP INFO TECHNOLOGY  Aggregate Year-to-Date   1300.00	-	·	
Receipt For: Primary General Other (specify)   1300.00	FEC ID number of contributing		
Primary General Other (specify) ▼ 1300.00	Name of Employer MEDCO HEALTH SOLUTIONS		
SUBTOTAL of Receipts This Page (optional)	Primary General		
	SUBTOTAL of Receipts This Page (optional	al)	125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any pers he name and address of any political committee t	son for the purpose of soliciting contributions
MEDCO HEALTH SOLUTIONS INC	. POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JEFFREY ALEXANDER		Date of Receipt
Mailing Address 4 DEERPOND CT  City	State Zip Code	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42192
FLEMINGTON	NJ 08822	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E-COM STRAT & DELI	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) DR JODY ALLEN		Date of Receipt
Mailing Address 3031 MOUNT HILL	DR	12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.42172
MIDLOTHIAN  FEC ID number of contributing federal political committee.	VA 23113	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MARENE ALLISON		Date of Receipt
Mailing Address 4405 WISMER ROA	D	1 2 0 8 2 0 0 7
City DOYLESTOWN	State Zip Code PA 18901	Transaction ID: INC.A.42483  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SECURITY & ASSET PROTECT	TION
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (optional)		115.00

ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 16/310   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JAMES ALLOCCO			Date of Receipt
Mailing Address 19 ROSS ROAD			12 08 2007
City SCARSDALE	State NY	Zip Code 10583	Transaction ID: INC.A.42239  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	n TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	<del>- + +</del>	e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) TEJWANSH ANAND			Date of Receipt
Mailing Address 10 WHIPPOORWIL	LL LAKE ROAD		1 2 0 8 2 0 0 7
City CHAPPAQUA	State NY	Zip Code 10514	Transaction ID: INC.A.42453
FEC ID number of contributing federal political committee.	C	10014	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	n TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MS MARIA ANDERSON			Date of Receipt
Mailing Address 4605 W SUNSET E	BLVD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TAMPA	State FL	Zip Code 33629	Transaction ID: INC.A.42352  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00020	5.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CUS		
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	e Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional	al)		105.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 310 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	Medco Health PAC)
Full Name (Last, First, Middle Initial) DR ROGER ANDERSON			Date of Receipt
Mailing Address 833 OXFORD COURT			12 08 2007
City LEWISVILLE	State TX	Zip Code 75056	Transaction ID: INC.A.42478
FEC ID number of contributing federal political committee.	C	73036	Amount of Each Receipt this Period 192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP & C	n HIEF PHARMACIST	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4999.80	
Full Name (Last, First, Middle Initial) MS JAYME ANTONOPLOS			Date of Receipt
Mailing Address 48 WITTE ROAD			12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42310
HEWITT  FEC ID number of contributing federal political committee.	NJ C	07421	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR EXE	n C CORR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR DAVID ARCISZEWSKI			Date of Receipt
Mailing Address 20 CHADWELL PLAC	E		12 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.42255
MORRISTOWN	NJ	07960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST CO		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	]
SUBTOTAL of Receipts This Page (optional)			242.30

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any persithe name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of any political committee to complete the name and address of the name and add	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ERIK BAGIN Mailing Address 73 HIGHLAND AVE  City GLEN RIDGE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS		Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42487  Amount of Each Receipt this Period  50.00
MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	GROUP VP FINANCE  Aggregate Year-to-Date ▼  1300.00	
Full Name (Last, First, Middle Initial) MS BECKIE BARATKO Mailing Address 80 N. WOODLAND	STREET	Date of Receipt  1 2 0 8 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42389
ENGLEWOOD	NJ 07631	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROPOSAL UNIT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 910.00	
Full Name (Last, First, Middle Initial)	l	Date of Receipt
MR THOMAS BARATTA  Mailing Address 69 SKYLINE DR		1 2 0 8 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42321
UPPER SADDLE RIVER  FEC ID number of contributing federal political committee.	NJ 07458	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (optional	ı)	135.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 310 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MRS BRENDA BASSETT			Date of Receipt
Mailing Address 1752 BLACKSTONE D	RIVE		12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42387
CARROLLTON	TX	75007	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP NATL		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR DAVID BAUGH			Date of Receipt
Mailing Address 1813 ADONIS AVE			M M / D D / Y Y Y Y Y Y Y 1 2 0 8 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42443
HENDERSON	NV	89074	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		23.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio MGR BE	n NEFIT DELIVERY SYSTEM:	<del>-</del> S
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1042.00	
Full Name (Last, First, Middle Initial) MR PETER BEGANS			Date of Receipt
Mailing Address 1605 CHARNITA CT			12 08 7 2007
City	State	Zip Code	Transaction ID: INC.A.42283
VIENNA	VA	22182	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP GOV	n ERNMENT AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2600.00	
SUBTOTAL of Receipts This Page (optional)		<b></b>	173.00

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commerci	al purposes, other than using the COMMITTEE (In Full)	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
		POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
A. MR STEPHE				Date of Receipt
	ess 24 GLENWOOD ROA		7. 0. 1	12 08 2007
City UPPER SA	ADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.42456  Amount of Each Receipt this Period
FEC ID num	ber of contributing cal committee.	С		50.00
Name of Em MEDCO HE	ployer ALTH SOLUTIONS	Occupatio VP FINA		
Receipt For: Primar Other		Aggregate	e Year-to-Date ▼ 1300.00	]
B. MS EILEEN E	Last, First, Middle Initial) BIDELL ress 71 WASHINGTON CT			Date of Receipt
				12 08 2007
City TOWACO		State NJ	Zip Code 07082	Transaction ID: INC.A.42316  Amount of Each Receipt this Period
FEC ID num	ber of contributing cal committee.	C	07002	25.00
Name of Em MEDCO HE	ployer ALTH SOLUTIONS	Occupatio SR DIR I	n PHARM OPS	
Receipt For: Primar Other		Aggregate	e Year-to-Date ▼ 650.00	
Full Name (L C. MR FLOYD E	ast, First, Middle Initial)			Date of Receipt
	ess 4273 BROGDAN FARI	M COURT		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: INC.A.42331
	ber of contributing cal committee.	GA C	30518	Amount of Each Receipt this Period  25.00
Name of Em MEDCO HE	ployer ALTH SOLUTIONS	Occupatio	n CAL SPECIALIST	
Receipt For: Primar Other			e Year-to-Date ▼ 650.00	
SUBTOTAL of	f Receipts This Page (optional)			100.00
	Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 310 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) BRYAN BIRCH Mailing Address 4 WINDRUSH LANI City	State	Zip Code	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
WESTPORT  FEC ID number of contributing federal political committee.	C	06880	Amount of Each Receipt this Period 192.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼		n PRES, EMPLOYER GROUF Year-to-Date ▼ 4992.00	
Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO Mailing Address 26 DAYLILY DRIVE			Date of Receipt  1 2 0 8 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42495
MOUNT LAUREL  FEC ID number of contributing federal political committee.	NJ C	08054	Amount of Each Receipt this Period  15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 555.00	
Full Name (Last, First, Middle Initial) MS SUZANNE BLACKBURN	I		Date of Receipt
Mailing Address 4520 LINWOOD LA	NE		12 08 2007
City	State MN	Zip Code	Transaction ID: INC.A.42441
DEEPHAVEN  FEC ID number of contributing federal political committee.	C	55331	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP CLII	n ENT & MKT STRATEGIC DE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	
			257.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 310 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR MARK BLAKE  Mailing Address 129 NORWOOD A	AVENUE		Date of Receipt
City MONTCLAIR	State NJ	Zip Code 07043	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42498  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	1	50.00
Receipt For: Primary General Other (specify)	VP BUSI	NESS DEV Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN Mailing Address 50 NEW ENGLAN	D DR		Date of Receipt  1 2 0 8 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42274
RAMSEY	NJ	07446	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS		NG & PRODUCT DEV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	]
Full Name (Last, First, Middle Initial) MR MICHAEL BOGDA	•		Date of Receipt
Mailing Address 80 LEONA CT			12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42445
LEVITTOWN  FEC ID number of contributing federal political committee.	C	11756	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	1 HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (option	al)	<b>)</b>	125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers he name and address of any political committee t	
/	. POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR DUANE BOSCH		Date of Receipt
Mailing Address 3935 BALSAM LA City	State Zip Code	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42140
PLYMOUTH	MN 55441	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) MR JOSEPH BOTTA		Date of Receipt
Mailing Address 109 ARBOR PL		1 2 0 8 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42145
BRYN MAWR	PA 19010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	650.00	
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX	1	Date of Receipt
Mailing Address 3380 SADDLEBROO	OK STREET	12 08 2007
City LAS VEGAS	State Zip Code NV 89141	Transaction ID: INC.A.42083  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
		60.00

	EDULE A (FEC Form 3X)  IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for o	ormation copied from such Reports and St commercial purposes, other than using the ME OF COMMITTEE (In Full) EDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	
A. MS Mai	Name (Last, First, Middle Initial) SALLIE BOWDEN ling Address 5259 FISHERCREST L  CHMOND CID number of contributing eral political committee.  The of Employer DCO HEALTH SOLUTIONS	State VA C		Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42395  Amount of Each Receipt this Period  200.00
Rec	ceipt For:  Primary General  Other (specify) ▼		MULARY CONSULTING  e Year-to-Date ▼  5000.00	]
<b>B.</b> MS	Name (Last, First, Middle Initial) HEIDI BOWMAN ling Address 15 DAWN LANE	State	Zip Code	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42438
FEC fede Nar ME	NGWOOD C ID number of contributing eral political committee. The of Employer DCO HEALTH SOLUTIONS reipt For: Primary General		07456  n HLTH MGMT e Year-to-Date ▼	Amount of Each Receipt this Period  30.00
<b>C.</b> MR	Other (specify)  Name (Last, First, Middle Initial) CHRISTOPHER BRADBURY ling Address 3 DEER HORN TRAIL	0 0	780.00	Date of Receipt  1 2 0 8 2 0 0 7
FE	PPER SADDLE RIVER C ID number of contributing eral political committee.	State NJ	Zip Code 07458	Transaction ID: INC.A.42148  Amount of Each Receipt this Period  10.00
	ne of Employer DCO HEALTH SOLUTIONS  seipt For: Primary General Other (specify)		n E ENHANCING SOLUTIONS e Year-to-Date ▼ 260.00	]
SUBT	OTAL of Receipts This Page (optional)			240.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  Any information copied from such Reports and	for De	e separate schedule(s) each category of the tailed Summary Page	FOR LINE NUMBER: PAGE 25 / 310 (check only one)    X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and address	of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS PATRICIA BRANUM  Mailing Address 210 FROG HOLLOW	ROAD		Date of Receipt  1 2 0 8 2 0 0 7
City		Zip Code	Transaction ID: INC.A.42382
COATESVILLE  FEC ID number of contributing federal political committee.	C	19320	Amount of Each Receipt this Period  75.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	Occupation VP INFO & PF Aggregate Year-	ROCESS ENGINEERING	G
Primary General Other (specify) ▼	0 0 0	1950.00	
Full Name (Last, First, Middle Initial)  MR DAVID BREEN  Mailing Address 27 SEALS DR			Date of Receipt    M
City MONROE		ip Code 10950	Transaction ID: INC.A.42363  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ANALYTI	CAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-	to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial)  C. MR JOHN BRENNAN	<b>'</b>		Date of Receipt
Mailing Address 2 CARMEN LANE			12 08 7 2007
City <u>FLEMINGTON</u>		ip Code )8822	Transaction ID: INC.A.42475  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP AUDIT		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-	to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional)		·····	110.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 310 (check only one)    X   11a
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. Policy in the such as		
Full Name (Last, First, Middle Initial) MR PAUL BRISSON Mailing Address 469 MANOR LANE  City PELHAM MANOR  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NY 10803  C	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42212  Amount of Each Receipt this Period  25.00
Receipt For: Primary General Other (specify)	DIR PRODUCT DEVELOPMENT Aggregate Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) MR RICHARD BROOKLER  Mailing Address 9 ROMARY COURT  City GLEN ROCK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07452  C  Occupation SR DIR FINANCE  Aggregate Year-to-Date ▼  400.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR KENNETH BROWN  Mailing Address 540 GIORDANO DRIVE  City YORKTOWN HEIGHTS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10598  C  Occupation VP INFO TECHNOLOGY  Aggregate Year-to-Date   1300.00	Date of Receipt    M M
SUBTOTAL of Receipts This Page (optional)		100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS VIVIAN BULGER Mailing Address 120 EAST MAIN ST  City	State	Zip Code	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42360
WASHINGTONVILLE  FEC ID number of contributing federal political committee.	C	10992	Amount of Each Receipt this Period  20.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼		n FINANCE e Year-to-Date ▼ 520.00	
Full Name (Last, First, Middle Initial)  MS MARY BURKE  Mailing Address 638 LENOX AVE			Date of Receipt  1 2 0 8 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42208
WESTFIELD	NJ	07090	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer MEDCO HEALTH SOLUTIONS	<del>-                                     </del>	R MEDICARE CLIENT PRO	n
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	]
Full Name (Last, First, Middle Initial) MR KEVIN BURON	•		Date of Receipt
Mailing Address 25 TIMBERLAND			12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42259
ALISO VIEJO  FEC ID number of contributing federal political committee.	CA	92656	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	n AL MGR GROUP	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional)	)		80.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	atements may not be sold or used by any personame and address of any political committee to OLITICAL ACTION COMMITTEE (a.k.a	
Full Name (Last, First, Middle Initial) MRS PEGEEN BUTTERFIELD Mailing Address 23 NUTTING PLACE City WEST CALDWELL FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State Zip Code NJ 07006  C Occupation SR DIR BUSINESS DEVELOPMENT	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42182  Amount of Each Receipt this Period  25.00
Primary General Other (specify)	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MRS DOREEN CALDER  Mailing Address 441 S ELM STREET  City MAYWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NJ 07607  C  Occupation DIR BUSINESS REQUIREMENTS  Aggregate Year-to-Date  1040.00	Date of Receipt  M M M / D D M / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR GABRIEL CAPPUCCI Mailing Address 119 WASHINGTON AV  City CHATHAM  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07928  C  Occupation VP FINANCE  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<b></b>	115.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>'</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR GERALD CARDONE			Date of Receipt
Mailing Address 3 MEADOW LANE			12 08 YYYY 12007
City	State	Zip Code	Transaction ID: INC.A.42411
ANNANDALE	NJ	08801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FAC	n ILITY PLANNING & DESIGI	N
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) MR RAYMOND CARLUCCI			Date of Receipt
Mailing Address 24 SHERI DRIVE			12 08 7 9 9 9
City	State	Zip Code	Transaction ID: INC.A.42354
ALLENDALE	NJ	07401	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		52.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA	n AL MGR GROUP	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1365.00	
Full Name (Last, First, Middle Initial) MS CATHERINE CASALE			Date of Receipt
Mailing Address 16345 HEATHROW	V DRIVE		1 2 0 8 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42406
TAMPA	FL	33647	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		13.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	338.00	
			75.50

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 310 (check only one)    X
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the r NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. Po	name and add	dress of any political committee to	o solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) MS MARY CASALE Mailing Address 822 CEDAR AVE  City HADDENFIELD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		Zip Code 08033  n ES STRATEGY & MARKETIN	Date of Receipt    M M M
— В.	Primary General Other (specify)  Full Name (Last, First, Middle Initial) MS KAREN CATHCART RUSSELL Mailing Address 148 CLUBHOUSE DR	Aggregate	650.00	Date of Receipt
	City WEST COLUMBIA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 29172  n CLINICAL SVCS e Year-to-Date ▼ 650.00	Transaction ID: INC.A.42107  Amount of Each Receipt this Period  25.00
	Full Name (Last, First, Middle Initial) MR JASON COLE Mailing Address 14917 E BELLA VISTA  City VERADALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 99037 n IRM PRACTICE e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 0 7  Transaction ID: INC.A.42248  Amount of Each Receipt this Period  10.00
s	UBTOTAL of Receipts This Page (optional)			60.00

Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.  Full Name (Last, First, Middle Initial)  MR FRANK COLIANO  Mailing Address 5176 BALDWIN TER  City  MARIETTA  FEC ID number of contributing federal political committee.	POLITICAL A	dress of any political committee to	solicit contributions from such committee.
MR FRANK COLIANO  Mailing Address 5176 BALDWIN TER  City  MARIETTA  FEC ID number of contributing			Date of Receipt
FEC ID number of contributing		Zip Code	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42186
rederal political committee.	GA C	30068	Amount of Each Receipt this Period  15.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		n CCT EXEC 9 Year-to-Date ▼	
Full Name (Last, First, Middle Initial) WILLIAM CONSIDINE Mailing Address 130 WEST 67TH STR	REET, #4J		Date of Receipt    M
City	State	Zip Code	Transaction ID: INC.A.42466
NEW YORK  FEC ID number of contributing federal political committee.	C	10023	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	_ '	n BUSINESS PLANNING & DE Year-to-Date ▼ 650.00	<u>:v</u>
Full Name (Last, First, Middle Initial) MR ROBERT COOK			Date of Receipt
Mailing Address 270 S FRANKLIN TU	RNPIKE		12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42135
RAMSEY  FEC ID number of contributing federal political committee.	NJ C	07446	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HLT	n H CARE OPS-TECHNOLOG	iY
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional)		·····	65.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS  Any information copied from such Benorts	Use separate schedule(s) for each category of the Detailed Summary Page and Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 32 / 310 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ng the name and address of any political committee to:  NC. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  ANTONIO CORREIA  Mailing Address 20 FACT 84 CT 85	TDEET #AD	Date of Receipt
Mailing Address 30 EAST 81ST S	INCEI, #96	12 08 2007
City	State Zip Code	Transaction ID: INC.A.42501
NEW YORK FEC ID number of contributing	NY 10028	Amount of Each Receipt this Period 50.00
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	_
MEDCO HEALTH SOLUTIONS	VP BUSINESS DEV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  800.00	
Full Name (Last, First, Middle Initial) MR STEPHEN COURTMAN		Date of Receipt
Mailing Address 25 FAIRWAY TRA	AIL	12 08 7 2007
City	State Zip Code	Transaction ID: INC.A.42240
SPARTA  FEC ID number of contributing federal political committee.	NJ 07871	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHARMACY NETWORK MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial)  MR HART COVEN		Date of Receipt
Mailing Address 28 OAK LANE		12 08 2007
City	State Zip Code	Transaction ID: INC.A.42330
MORRISTOWN	NJ 07960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optio	nal)	150.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 310 (check only one)    X
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	solicit contributions from such committee.
<b>∠</b> <b>A</b> .	Full Name (Last, First, Middle Initial) MR ROBERT CRAIG Mailing Address 7979 E SANTA CATA City	ALINA DR	Zip Code	Date of Receipt    M
	SCOTTSDALE  FEC ID number of contributing federal political committee.	AZ C	85255	Amount of Each Receipt this Period  60.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		n R PRODUCT e Year-to-Date ▼ 840.00	
- В.	Full Name (Last, First, Middle Initial) MR ANGELO CUOZZO  Mailing Address 19 IDA COURT	1		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.42268
	STATEN ISLAND  FEC ID number of contributing federal political committee.	C	10312	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n :HNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
_ ).	Full Name (Last, First, Middle Initial) MS ROSELIN DANIEL			Date of Receipt
	Mailing Address 17 DEVONSHIRE DE	RIVE		12 08 2007
	City	State	Zip Code	Transaction ID: INC.A.42336
	RANDOLPH  FEC ID number of contributing federal political committee.	NJ C	07869	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n BENEFIT DELIVERY SYS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional)			110.00
	TOTAL This Period (last page this line number	er only)	<b>)</b>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 310 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR KENNETH DANIELS Mailing Address 2903 CHUKKAR CO City PLANT CITY FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	DURT  State Zip Code FL 33567  C  Occupation VP/GM  Aggregate Year-to-Date ▼  1300.00	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42312  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS MARY DASCHNER  Mailing Address 2926 EWING AVE  City MINNEAPOLIS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	S  State Zip Code MN 55416  C  Occupation SVP & GENERAL MGR MEDICARE Aggregate Year-to-Date  4999.80	Date of Receipt    M
Full Name (Last, First, Middle Initial) DR AMITA DASMAHAPATRA Mailing Address 24 CHARLOTTE HI  City BERNARDSVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07924  C  Occupation SR DIR MEDICAL POLICY & PROG Aggregate Year-to-Date  260.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional	l)	227.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persor to name and address of any political committee to see POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ANDREW DAVIS Mailing Address 5616 BROOK DRIVE  City EDINA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code MN 55439  C  Occupation VP MEDICARE CLIENT & SALES SU  Aggregate Year-to-Date   1300.00	Date of Receipt  1 2
Full Name (Last, First, Middle Initial) MR DANIEL DAVISON Mailing Address 402 HIGHLAND AVE  City RIDGEWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07450  C  Occupation VP PRICING  Aggregate Year-to-Date   1300.00	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: INC.A.42355  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MR LUCA DEFLORENTIIS Mailing Address W62 N1032 FAIRHAN  City CEDARBURG  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	VEN CT  State Zip Code WI 53012  C  Occupation SR DIR ACCT MGMT  Aggregate Year-to-Date ▼  650.00	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42284  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  Any information copied from such Reports and 3	Use separate schedule(s) for each category of the Detailed Summary Page  Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 36 / 310 (check only one)    X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS BARBARA DELLEDONNA  Mailing Address 199 SANFORD AVE		Date of Receipt
City	State Zip Code	1 2 0 8 2 0 0 7 Transaction ID: INC.A.42392
EMERSON	NJ 07630	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E-COM BUSINESS OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) MR PAUL DELLO RUSSO		Date of Receipt
Mailing Address 80 HILLSIDE AVENU	Ξ	12 08 2007
City	State Zip Code	Transaction ID: INC.A.42257
GLEN RIDGE	NJ 07028	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST COUNSEL	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial)  MS TONI DEMANSS		Date of Receipt
Mailing Address 32 RED BARN LANE		12 08 2007
City	State Zip Code	Transaction ID: INC.A.42474
WEST MILFORD	NJ 07480	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional) .		60.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to . POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS MAUREEN DEMPSEY  Mailing Address 17 RICHWOOD PLA  City  DENVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NJ 07834  C  Occupation DIR MEDICARE COMPLIANCE Aggregate Year-to-Date  650.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 0 7  Transaction ID: INC.A.42489  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) DONNA DENARDO Mailing Address W2996 GIBRALTEF  City FISH CREEK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code WI 54212  C  Occupation SVP & GENERAL MGR MEDICARE Aggregate Year-to-Date  384.60	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR JOHN DERRICO Mailing Address 195 HACKENSACK  City HARRINGTON PARK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	AVENUE  State Zip Code NJ 07640  C  Occupation SR DIR MARKETING  Aggregate Year-to-Date  400.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42449  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)	)	242.30

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 310 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee to	
` '	C. POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS KAREN DEZEARN		Date of Receipt
Mailing Address 3625 PATTERSTOI  City	NE DR State Zip Code	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42109
ALPHARETTA	GA 30022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR WILLIS DINGLE		Date of Receipt
Mailing Address 17826 ARBOR GRI	EENE DR	12 08 2007
City	State Zip Code	Transaction ID: INC.A.42181
TAMPA  FEC ID number of contributing federal political committee.	FL 33647	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR HR	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1300.00	
Full Name (Last, First, Middle Initial) MR ROBERT DOLAN		Date of Receipt
Mailing Address 9 CRANE AVENUE		1 2 0 8 2 0 0 7
City WEST CALDWELL	State Zip Code NJ 07006	Transaction ID: INC.A.42337  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BENEFIT DELIVERY SYSTEMS	3
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optiona	1	75.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to  POLITICAL ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS MERIDITH DORNER  Mailing Address 4448 CREEK ROAD  City  ALLENTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code PA 18104  C  Occupation SR DIR ACCT MGMT  Aggregate Year-to-Date   650.00	Date of Receipt    M   M
Full Name (Last, First, Middle Initial) MR H.RONALD DRIZIN Mailing Address 17 DAYBREAK  City IRVINE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code CA 92614  C  Occupation VP CONTRACT ADMINISTRATOR Aggregate Year-to-Date  1300.00	Date of Receipt  M M M / D D N / Y Y Y Y Y  1 2 0 0 7  Transaction ID: INC.A.42396  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MR DANA DUNCAN Mailing Address 72 HALLEY DR  City POMONA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10970  C  Occupation SR DIR TECHNOLOGY  Aggregate Year-to-Date   650.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		100.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 310 (check only one)    X
Ar	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	o solicit contributions from such committee.
<u>/</u> A.	Full Name (Last, First, Middle Initial) MR PETER DUNLEAVY Mailing Address 2 DECKER TERRACE	Olah	7.0.4	Date of Receipt  1 2 0 8 2 0 0 7
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.42149  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07400	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	Occupatio DIR FINA Aggregate		1
 3.	Full Name (Last, First, Middle Initial) MR STEPHEN DUNLEAVY Mailing Address 14026 KNOX STREET	0 0		Date of Receipt  1 2 0 8 2 0 0 7
	City	State	Zip Code	Transaction ID: INC.A.42177
	OVERLAND PARK	KS	66221	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SALE	n ES SEGMENT LEADER	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
. —	Full Name (Last, First, Middle Initial) MR MARK DUNN			Date of Receipt
	Mailing Address 2 OLD MILL ROAD			12 08 2007
	City	State	Zip Code	Transaction ID: INC.A.42152
	SANDY HOOK FEC ID number of contributing federal political committee.	CT	06482	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n TECHNOLOGY	
	Receipt For:  Primary General  Other (specify) ▼	_	e Year-to-Date ▼ 400.00	
s	SUBTOTAL of Receipts This Page (optional)			100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 310 (check only one)    X   11a
7	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR YAACOV DUSHEK			Date of Receipt
	Mailing Address 312 MEGAN CT			12 08 2007
	City	State	Zip Code	Transaction ID: INC.A.42326
	WYCKOFF	NJ	07481	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on BENEFIT DELIVERY SYS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
- В.	Full Name (Last, First, Middle Initial) MS GEORGIA EDDLEMAN			Date of Receipt
	Mailing Address 908 EDGEMEER LAN	NE		12 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.42425
	SOUTHLAKE	TX	76092	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		34.45
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1791.40	
- С.	Full Name (Last, First, Middle Initial) MR MICHAEL EDWARDS			Date of Receipt
	Mailing Address 109 KAREN PLACE			12 08 2007
	City	State	Zip Code	Transaction ID: INC.A.42141
	WYCKOFF  FEC ID number of contributing federal political committee.	C	07481	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	on	
	Receipt For:  Primary General  Other (specify) ▼	<del>-                                     </del>	e Year-to-Date ▼ 750.00	
	SUBTOTAL of Receipts This Page (optional) .	1		109.45
Ī	TOTAL This Period (last page this line numbe	r only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 310 (check only one)    X
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) DR WOODY EISENBERG, MD	_		Date of Receipt
	Mailing Address 128 SUMMIT AVENU		7: 0.1	12 08 2007
	City UPPER MONTCLAIR	State NJ	Zip Code 07043	Transaction ID: INC.A.42477  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MEDICA	on RE CHIEF MEDICAL OFFIC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
В.	Full Name (Last, First, Middle Initial) MR FREDERICK ELSTON Meiling Address 100 CRAHAM TERRO	1		Date of Receipt
	Mailing Address 106 GRAHAM TERRA	AGE		12 08 7 2007
	City SADDLE BROOK	State NJ	Zip Code 07663	Transaction ID: INC.A.42327
	FEC ID number of contributing federal political committee.	C	07000	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	on CAL SPECIALIST	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
с. С.	Full Name (Last, First, Middle Initial) MR SCOTT ENOS			Date of Receipt
	Mailing Address 22 BARNARD RD			12 08 2007
	City WARWICK	State RI	Zip Code 02886	Transaction ID: INC.A.42243
	FEC ID number of contributing federal political committee.	C	02800	Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLII	on NICAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
	SUBTOTAL of Receipts This Page (optional) .	1		85.00
	TOTAL This Period (last page this line number	r only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN	D.F.A.O.T.		Date of Receipt
	Mailing Address 359 LONG HILL ROAI	D EAST		12 08 7 2007
	City	State	Zip Code	Transaction ID: INC.A.42480
	BRIARCLIFF MANOR	NY	10510	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP COR	n P COMMUNICATIONS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1300.00	
— В.	Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN	1		Date of Receipt
	Mailing Address 75 TWEED BLVD			12 08 2007
	City	State	Zip Code	Transaction ID: INC.A.42072
	UPPER GRANDVIEW	NY	10960	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS		P MEDICAL&ANLYTC AFF	RS
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify)		5000.00	
с. С.	Full Name (Last, First, Middle Initial) MR SCOTT ERHARDT			Date of Receipt
	Mailing Address 11540 39TH AVE N			12 08 2007
	City	State	Zip Code	Transaction ID: INC.A.42228
	PLYMOUTH	MN	55441	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n ACCT MGMT	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		390.00	
Γ,	SUBTOTAL of Receipts This Page (optional)	1	<b>\</b>	257.31
$\vdash$	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 310 (check only one)    X   11a
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person the name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR YAKOV ESTERLIS  Mailing Address 800 PALISADE AVE APT 706  City FORT LEE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07024  C  Occupation SR DIR BENEFIT DELIVERY SYS  Aggregate Year-to-Date   650.00	Date of Receipt  M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR STEVEN FANDETTI Mailing Address 15804 SORAWATER  City LITHIA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code FL 33547  C  Occupation NATL ACCT EXEC  Aggregate Year-to-Date  390.00	Date of Receipt  M M M / D D M 2007  Transaction ID: INC.A.42160  Amount of Each Receipt this Period  15.00
Full Name (Last, First, Middle Initial) DR RICHARD FEIFER Mailing Address 32 EILEEN DR  City MAHWAH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07430  C  Occupation VP CARE ENHANCING SOLUTIONS Aggregate Year-to-Date   1300.00	Date of Receipt  M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		90.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	OLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR THOMAS FEITEL  Mailing Address 58 APPLE HILL DR			Date of Receipt
				12 08 2007
	CILLETTE	State NJ	Zip Code	Transaction ID: INC.A.42260
	GILLETTE  FEC ID number of contributing federal political committee.	C	07933	Amount of Each Receipt this Period 192.23
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP CO	on RP MKTG & E-COMM	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 4997.98	
– В.	Full Name (Last, First, Middle Initial) MS DAWN FELDNER			Date of Receipt
	Mailing Address 275 BIRCH STREET			12 08 2007
	City	State	Zip Code	Transaction ID: INC.A.42397
	EMERSON	NJ	07630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	. '	SINESS REQUIREMENTS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
С. С.	Full Name (Last, First, Middle Initial) MR THOMAS FERRAZZANO			Date of Receipt
	Mailing Address 464 SPRING AVE.			12 08 YYYY 12007
	City RIDGEWOOD	State NJ	Zip Code	Transaction ID: INC.A.42356
	FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on CARD OPS	
	Receipt For:  Primary General  Other (specify) ▼	. '	e Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional)			242.23
T	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso e name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR DON FISCHER Mailing Address 10 TRACY CIRCLE  City CAMPBELL HALL FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10916  C  Occupation DIR E-COM STRAT & DELIV  Aggregate Year-to-Date ▼  650.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR EDWARD FISCHER Mailing Address 465 OLD STONE RD  City RIDGEWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General		Date of Receipt  M M / D D / Y Y Y Y Y  1 2 0 0 7  Transaction ID: INC.A.42205  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MR ANTHONY FLOWERS Mailing Address 1933 MT. OLIVE AGOSTA ROAD City NEW BLOOMINGTON FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code OH 43341  C  Occupation SR DIR HLTH CARE OPS  Aggregate Year-to-Date   650.00	Date of Receipt  M M M / D D M 2 0 0 7  Transaction ID: INC.A.42300  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso to name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR PAUL FORTUNATO, III Mailing Address 18 WINDING RIDGE  City OAKLAND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07436  C  Occupation SR NATL ACCT EXEC Aggregate Year-to-Date  260.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO Mailing Address 9 GREEN HILL TRAI  City TROPHY CLUB  FEC ID number of contributing federal political committee.	State Zip Code TX 76262	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP/GM  Aggregate Year-to-Date   2600.00	
Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL Mailing Address 1434 NARRAGANSE  City CRANSTON  FEC ID number of contributing	TT BLVD  State Zip Code RI 02905	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation SR DIR GOV AFFAIRS  Aggregate Year-to-Date	
Primary General Other (specify) ▼	780.00	
SUBTOTAL of Receipts This Page (optional)	······	90.00

ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 48/310   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JOSEPH GALARDI			Date of Receipt
Mailing Address 24 MOREHOUSE PI	L		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.42069
NEW PROVIDENCE	NJ	07974	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP & CO		
Receipt For:  Primary General  Other (specify)	Aggregate	Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI			Date of Receipt
Mailing Address 720 N. LARRABEE APT 1701		Zip Code	12 08 YYYY 12 08 2007
City	Transaction ID: INC.A.42437		
CHICAGO  FEC ID number of contributing federal political committee.	C	60610	Amount of Each Receipt this Period  192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) MS IRENE GALE			Date of Receipt
Mailing Address 3 MAIZE TRAIL			12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42201
PLACITAS	NM	87043	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n CLINICAL SVCS	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	
Other (specify) ▼		260.00	
			252.31

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 310 (check only one)    X   11a
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	o solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) MS IVY GALLACCHI Mailing Address 11 LAKE AVENUE  City MALTA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General		Zip Code 12020 In D TECHNOLOGY e Year-to-Date ▼	Date of Receipt  12 08 2007  Transaction ID: INC.A.42476  Amount of Each Receipt this Period  10.00
В.	Full Name (Last, First, Middle Initial) MS PATRICIA GALLAGHER Mailing Address 842 ASHLER CT  City COLUMBUS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		Zip Code 43235  n CCT EXEC e Year-to-Date ▼ 420.00	Date of Receipt  M M M / D D M / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_ C.	Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO Mailing Address 69 LAKEVIEW DR  City OLD TAPPAN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 07675 on NT RELATIONS e Year-to-Date ▼	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42291  Amount of Each Receipt this Period  50.00
F	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		<u> </u>	85.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17		
	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)		
A.	Full Name (Last, First, Middle Initial) MICHAEL GALVIN			Date of Receipt		
	Mailing Address 25 BALLYMEADE RO	12 08 2007				
	City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.42462  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	12500	192.31		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP/CH	n IEF INFRASTRUCTURE OF	─ FR		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00			
В.	Full Name (Last, First, Middle Initial) MR OMHARAISRIRAM GANGAIKONDAN-IYER Mailing Address 9 CAIRNES ROAD			Date of Receipt		
	City State MORRIS PLAINS NJ			12 08 2007		
			Zip Code 07950	Transaction ID: INC.A.42469  Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C	0.7300	25.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	on CAL SPECIALIST			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00			
C.	Full Name (Last, First, Middle Initial) MR PETER GAYLORD					
	Mailing Address 1201 BRIDGE STREE	Mailing Address 1201 BRIDGE STREET				
	City ASBURY PARK	State NJ	Zip Code 07712	Transaction ID: INC.A.42068		
	FEC ID number of contributing federal political committee.	C	UTTIZ	Amount of Each Receipt this Period  50.00		
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP TRI	on EASURY & FINANCIAL EVA	 L\$		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00			
	SUBTOTAL of Receipts This Page (optional)			267.31		
	TOTAL This Period (last page this line number		<u> </u>			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16	
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.)	son for the purpose of soliciting contributions o solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) MR FRANK GENTILELLA Mailing Address 20 BROOKSHIRE DR  City ROBBINSVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	, 	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42179  Amount of Each Receipt this Period  50.00	
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MATTHEW GIBBS  Mailing Address 27 N. WACKER DR. SUITE 246	1300.00	Date of Receipt  1 2 0 8 2 0 0 7	
City CHICAGO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code  IL 60606  C Occupation	Transaction ID: INC.A.42509  Amount of Each Receipt this Period  75.00	
MEDCO HE'ALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	CHIEF CLINICAL OFFICER  Aggregate Year-to-Date ▼  225.00		
Full Name (Last, First, Middle Initial) MR ROBERT GIBBS Mailing Address 544 DENMOOR COU			
City GALLOWAY	State Zip Code OH 43119	Transaction ID: INC.A.42123  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIP BLADM PRACTICE	12.50	
Receipt For: Primary General Other (specify)	DIR PHARM PRACTICE  Aggregate Year-to-Date ▼  650.00		
SUBTOTAL of Receipts This Page (optional) .	<u> </u>	137.50	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 310 (check only one)    X	
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
Full Name (Last, First, Middle Initial) MR THOMAS GILSON Mailing Address 2 PELL FARM ROA  City SADDLE RIVER FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State NJ C Occupation GENERA		Date of Receipt  M M M / D D M 2007  Transaction ID: INC.A.42432  Amount of Each Receipt this Period  192.31	
Other (specify) ▼  Full Name (Last, First, Middle Initial) MR SCOTT GILYARD  Mailing Address 305 BERGAMOT D  City MEDINA	Other (specify)   Full Name (Last, First, Middle Initial) MR SCOTT GILYARD Mailing Address 305 BERGAMOT DRIVE  City State Zip Code			
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation PRES UI		192.30	
Full Name (Last, First, Middle Initial) MS AUDREY GOODMAN Mailing Address 26 HILLSIDE AVE.  City GLEN ROCK FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State NJ  C  Occupation VP ORG  Aggregate	DEV Year-to-Date ▼	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42372  Amount of Each Receipt this Period  15.00	
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional	)	390.00	399.61	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>^</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 53/310   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JAMES GORMAN			Date of Receipt
Mailing Address 11 WASHBURN RI	D		12 08 2007
CANTON	State CT	Zip Code	Transaction ID: INC.A.42137
CANTON  FEC ID number of contributing federal political committee.	C	06022	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n CLIENT & MKT PROG STRA	— AT
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR JAMES GRANT, JR	Date of Receipt		
Mailing Address 1928 BEVERLY LA	12 08 YYYYY 12007		
City BUFFALO GROVE	State IL	Zip Code 60089	Transaction ID: INC.A.42195
FEC ID number of contributing federal political committee.	C	00005	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA	n NCIAL INSIGHTS	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	e Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR EDWARD GRIX			Date of Receipt
Mailing Address 525 ORANGEBURG RD			M M / D D / Y Y Y Y Y 1 1 2 0 8 2 0 0 7
City PEARL RIVER	State NY	Zip Code 10965	Transaction ID: INC.A.42216
FEC ID number of contributing federal political committee.	C	10905	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n E-COM BUSINESS OPS	7
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional	al)		100.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for e	separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 54 / 310 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than usi  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS II	ng the name and address of	any political committee to	
Full Name (Last, First, Middle Initial)  MS GINA GRUHN  Mailing Address 13 WEATHER VA	NE DRIVE		Date of Receipt
City CONVENT STATION FEC ID number of contributing	NJ 07	o Code '960	Transaction ID: INC.A.42253  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGIONAL VP	SALES-SYSTEMED	25.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to		
Full Name (Last, First, Middle Initial) MS TRACY GRUNSFELD Mailing Address 264 HARVEST A	Date of Receipt  1 2 0 8 2 0 0 7		
City	State Zip	) Code	Transaction ID: INC.A.42127
STATEN ISLAND	NY 10	310	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer MEDCO HEALTH SOLUTIONS		R DRIVEN MKTS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	o-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) MR RICHARD GUIOR	•		Date of Receipt
Mailing Address 50 BELLEVUE A	/E		12 08 2007
City		Code	Transaction ID: INC.A.42089
SUMMIT  FEC ID number of contributing federal political committee.	NJ 07	901	Amount of Each Receipt this Period  90.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP COO		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to	2340.00	
SUBTOTAL of Receipts This Page (option	nal)		130.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	BX)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 310 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS II	ng the name and add	lress of any political committee to	
Full Name (Last, First, Middle Initial)  MR MARK HALLORAN  Mailing Address 19 KINGS RIDGE	ROAD		Date of Receipt
City  LONG VALLEY  FEC ID number of contributing	State NJ	Zip Code 07853	Transaction ID: INC.A.42328  Amount of Each Receipt this Period
rec in number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	<del></del>	TFO OFFICER  Year-to-Date ▼	192.31
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate	5000.00	]
MR GREGORY HANSEN  Mailing Address 1659 ISABELLA I	Date of Receipt    M		
City	State	Zip Code	Transaction ID: INC.A.42436
CHASKA FEC ID number of contributing federal political committee.	C	55318	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	- + ·	SVCS & ADMIN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	]
Full Name (Last, First, Middle Initial) MS KELLY HANZAWA			Date of Receipt
Mailing Address 1116 OAKCROF	12 08 7 2007		
City	State	Zip Code	Transaction ID: INC.A.42399
SOMERSET  FEC ID number of contributing federal political committee.	NJ C	08873	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC	T MGMT OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optio	nal)		267.31

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 310 (check only one)    X
	nd Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR CHRISTOPHER HARLOW		Date of Receipt
Mailing Address 8 PROSPECT PLAG		12 08 2007
City POMPTON PLAINS	State Zip Code NJ 07444	Transaction ID: INC.A.42118  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MS SHANA HART		Date of Receipt
Mailing Address 5505 CEDAR CREE	12 08 2007	
City	State Zip Code	Transaction ID: INC.A.42250
SNYDER  FEC ID number of contributing federal political committee.	TX 79549	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) MR PETER HARTY		Date of Receipt
Mailing Address 19520 YELLOW W	1 2 0 8 2 0 0 7	
City	State Zip Code	Transaction ID: INC.A.42071
COLORADO SPRINGS  FEC ID number of contributing federal political committee.	CO 80908	Amount of Each Receipt this Period  192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP GOVERNMENT AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
CURTOTAL of Descripts This Days (antique	I)	227.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 310 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BILL HEAD Mailing Address 501 SLATERS LANE #816 City ALEXANDRIA FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General		Zip Code 22314 on GOV AFFAIRS e Year-to-Date ▼	Date of Receipt  M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR MARK HEGGESTAD Mailing Address 13210 N. 11TH AVE.  City PHOENIX  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State AZ C Occupatio VP SALE Aggregate	Zip Code 85029	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42146  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS EILEEN HEINZ Mailing Address 27 DOGWOOD LN  City MONTVALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	. '	Zip Code 07645	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 0 7  Transaction ID: INC.A.42429  Amount of Each Receipt this Period  10.00
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number			60.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 310 (check only one)    X		
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) MR SCOTT HELMUS Mailing Address 23 VALLEY RD City	State	Zip Code	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42128		
SUCCASUNNA  FEC ID number of contributing federal political committee.	NJ C	07876	Amount of Each Receipt this Period  50.00		
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		n NT SOLUTIONS 9 Year-to-Date ▼ 1300.00			
Full Name (Last, First, Middle Initial) MR ERIC HESS Mailing Address 10 CARLTON RD	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	•				
FLANDERS	NJ	07836	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		50.00		
Name of Employer MEDCO HEALTH SOLUTIONS		NEERING & OPS			
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	]		
Full Name (Last, First, Middle Initial) MS JANE HILDEBRANDT	•		Date of Receipt		
Mailing Address 35 CASCADE WAY			12 08 2007		
City	State	Zip Code	Transaction ID: INC.A.42226		
BUTLER FEC ID number of contributing federal political committee.	NJ C	07405	Amount of Each Receipt this Period  25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR E-C0	n OM STRAT & DELIV			
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00			
SUBTOTAL of Receipts This Page (optional	)		125.00		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 310 (check only one)    X
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any pers g the name and address of any political committee to IC. POLITICAL ACTION COMMITTEE (a.k.a.	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN HOBSON Mailing Address 1 HERITAGE RD  City FLORHAM PARK FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	State Zip Code NJ 07932  C  Occupation REGIONAL VP PHARMACIES  Aggregate Year-to-Date	Date of Receipt    M M M
Primary General Other (specify)  Full Name (Last, First, Middle Initial) MR GLENN HOFFMAN	1300.00	Date of Receipt
Mailing Address 974 HILLCREST F  City  RIDGEWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General	State Zip Code NJ 07450  C  Occupation VP FACILITIES  Aggregate Year-to-Date   840.00	Transaction ID: INC.A.42373  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MR TIMOTHY HOGAN Mailing Address 9 HIRLE ST  City CORNWALL ON HUDSON FEC ID number of contributing federal political committee.	State Zip Code NY 12520	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42221  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation TECHNICAL SPECIALIST  Aggregate Year-to-Date   650.00	
SUBTOTAL of Receipts This Page (option	nal)	125.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and St or for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ROGER HOLLAND Mailing Address 41 SAINT RAPHAEL			Date of Receipt
	City	State	Zip Code	1 2 0 8 2 0 0 7 Transaction ID: INC.A.42287
	LAGUNA NIGUEL	CA	92677	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALE		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	
В.	Full Name (Last, First, Middle Initial) MR J. HOLLINGER	Date of Receipt		
	Mailing Address 784 CAPE HENRY DR	12 08 7 2007		
	City	Transaction ID: INC.A.42302		
	COLUMBUS	OH	43228	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			4.17
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	n SINESS PLANNING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 216.84	
с. С.	Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK			Date of Receipt
	Mailing Address 49 S HILLSIDE AVE			12 08 2007
	City ELMSFORD	State NY	Zip Code	Transaction ID: INC.A.42324
	FEC ID number of contributing federal political committee.	C	10523	Amount of Each Receipt this Period  80.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INTE	n RVENTION DELIVERY SYS	<del>-</del> ⊤
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		2080.00	
	SUBTOTAL of Receipts This Page (optional)			134.17
上	TOTAL This Period (last page this line number of		·	

SCHEDULE ITEMIZED RI	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NU (check only or X 11a	
or for commercial pu	urposes, other than using the r	atements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose solicit contribution	e of soliciting contributions ons from such committee.
NAME OF COM MEDCO HEAD	, ,	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Healtl	h PAC)
MS CYNTHIA HC	First, Middle Initial) RN 9553 ANDREW DR			Date of Re	<u> </u>
City	9000 ANDREW DR	State	Zip Code	1 2	0 8 2 0 0 7 on ID: INC.A.42511
<b>TWINSBURG</b>		OH	44087		Each Receipt this Period
FEC ID number federal political c		C			50.00
Name of Employ MEDCO HEALT	er H SOLUTIONS	Occupation VP CUS			
Receipt For: Primary Other (spe	General	Aggregate	Year-to-Date ▼ 523.18		
Full Name (Last, MR STEVEN HO	First, Middle Initial) ROWITZ			Date of Re	ceipt
	30 AVENUE AT PORT APT. 415			1 2	08 / 2007
City		State	Zip Code		n ID: INC.A.42496
WEST NEW Y	<u>/ORK</u>	NJ	07093	Amount of	Each Receipt this Period
	EC ID number of contributing ederal political committee.				50.00
Name of Employ MEDCO HEALT	er H SOLUTIONS	Occupation VP BUSI	n NESS PLANNING		
Receipt For: Primary Other (spe	General cify) <b>▼</b>	Aggregate	Year-to-Date ▼ 1300.00	]	
Full Name (Last, MR JEFFREY HL	First, Middle Initial)			Date of Re	ceipt
Mailing Address	2616 S 3B'S & K RD			12	08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code		n ID: INC.A.42303
GALENA		ОН	43021	Amount of	Each Receipt this Period
FEC ID number federal political c		С			30.00
Name of Employ MEDCO HEALT	er H SOLUTIONS		FESSIONAL PRACTICES		
Receipt For:		Aggregate	Year-to-Date ▼	_	
Primary Other (spe	☐ General cify) ▼		665.00		
SUBTOTAL of Re	Leipts This Page (optional)				130.00
	d (last page this line number o		<u> </u>		

ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 62/310   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS JANE HULSE			Date of Receipt
Mailing Address 95 GORDON RD			M M / D D / Y Y Y Y Y Y 1 2 0 0 7
City ESSEX FELLS	State NJ	Zip Code 07021	Transaction ID: INC.A.42359
FEC ID number of contributing federal political committee.	C	07021	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
Receipt For:  Primary  General  Other (specify)	<del>-                                     </del>	e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR DAVID ISRAEL			Date of Receipt
Mailing Address 730 COLUMBUS A	VENUE		12 08 7 9 9 7
City NEW YORK	State NY	Zip Code 10025	Transaction ID: INC.A.42075  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10025	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSI	n NESS DEV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	]
Full Name (Last, First, Middle Initial) MS SUSAN ITO			Date of Receipt
Mailing Address 6366 SW 90TH STR	REET		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City GAINESVILLE	State FL	Zip Code 32608	Transaction ID: INC.A.42085  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	32000	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R CLINICAL SVCS	
Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	х)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 310 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS TERESE JACKSON  Mailing Address 6085 S. PRESTON	N LANE		Date of Receipt  1 2 0 8 2 0 0 7
City NEW BERLIN FEC ID number of contributing federal political committee.	State WI	Zip Code 53151	Transaction ID: INC.A.42129  Amount of Each Receipt this Period  10.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation NATL AC	n CCT EXEC 9 Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR WILLIAM JACKSON Mailing Address 56 WARREN RD			Date of Receipt    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WEST ORANGE FEC ID number of contributing	State NJ	Zip Code 07052	Transaction ID: INC.A.42410  Amount of Each Receipt this Period  50.00
Receipt For:  Primary  Other (specify) ▼	Occupation EXEC DI	n R MEDICARE OPS 9 Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR TODD JEFFREY Mailing Address 15 ELIZABETH ST	REET		Date of Receipt
City DUMONT	State NJ	Zip Code 07628	Transaction ID: INC.A.42423  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07020	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	- + +	RM CONTRACT & CONSUL	TING
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (option	al)		110.00

ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 64/310   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) ROBERT JINKS			Date of Receipt
Mailing Address 22 PAGE AVE			12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42120
LYNDHURST  FEC ID number of contributing federal political committee.	NJ C	07071	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP BUSI	n NESS REQUIREMENTS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) MR WILLIAM JOEL			Date of Receipt
Mailing Address 32 VENTOSA DR			1 2 0 8 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MORRISTOWN	State NJ	Zip Code 07960	Transaction ID: INC.A.42254  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07000	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR ANA	n ALYTICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	e Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR RICHARD JONES			Date of Receipt
Mailing Address 12 WADE HAMPTO	N TRAIL		12 08 2007
City HENDERSON	State NV	Zip Code 89052	Transaction ID: INC.A.42375
FEC ID number of contributing federal political committee.	C	03032	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 863.52	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 310 (check only one)    X   11a
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS KATHRYN JONSRUD			Date of Receipt
	Mailing Address 16357 VICTORIA CU	RVE SE		12 08 2007
	City	State	Zip Code	Transaction ID: INC.A.42249
	PRIOR LAKE	MN	55372	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLII	on ENT & MKT PROG STRAT	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1
	Other (specify) ▼	0 0	660.00	
В.	Full Name (Last, First, Middle Initial) MR JOHN KAPIOSKI	•		Date of Receipt
	Mailing Address 8202 MARSH GLEN (	CT		12 08 2007
	City	State	Zip Code	Transaction ID: INC.A.42353
	TAMPA	<u>FL</u>	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on PHARMACY COMPLIANCE	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify)		1300.00	
- C.	Full Name (Last, First, Middle Initial) MS BECKY KAUS			Date of Receipt
	Mailing Address N81 W18359 TOURS	DR		12 08 2007
	City MENOMONEE FALLS	State WI	Zip Code 53051	Transaction ID: INC.A.42237  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	33031	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on CLINICAL SVCS	7
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	1
Г			0 0 0 0 0 0 0	
	SUBTOTAL of Receipts This Page (optional) .			100.00
	TOTAL This Period (last page this line number	r only)		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.
2	Full Name (Last, First, Middle Initial)	OLITICAL	ACTION COMMITTEE (a.k.a	, 
۱.	MR WILLIAM KEELER  Mailing Address 63 MOUNTAIN GLEN	ROAD		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
	City RINGWOOD	State NJ	Zip Code	Transaction ID: INC.A.42444
	FEC ID number of contributing federal political committee.	C	07456	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	n CAL SPECIALIST	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
	Full Name (Last, First, Middle Initial) MR WILLIAM KELLEY, III Mailing Address 1970 WOODLANDS P	L		Date of Receipt
	City	State	Zip Code	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42292
	POWELL	OH	43065	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENER/	n AL MGR GROUP	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 725.00	
_	Full Name (Last, First, Middle Initial) MR KEVIN KELLY			Date of Receipt
	Mailing Address 251 POPLAR AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.42110
	HACKENSACK FEC ID number of contributing federal political committee.	C	07601	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n CLIENT SVC DELIVERY	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
T	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR PETER KENNY Mailing Address 32 ADDISON DR  City FAIRFIELD FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07004  C  Occupation DIR ACCT MGMT  Aggregate Year-to-Date  275.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MS LISA KETNER Mailing Address 7 POINT VIEW  City OAKLAND FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code NJ 07436  C  Occupation VP MEMBER STRATEGY  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D M / Y Y Y Y Y  1 2 0 0 7  Transaction ID: INC.A.42280  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MS KARIN KLEINEGGER Mailing Address 121 CONKLING TO  City CHESTER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼	DWN ROAD  State Zip Code NY 10918  C  Occupation DIR HLTH MGMT  Aggregate Year-to-Date   1300.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	l)	125.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	m 3X)  Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 310 (check only one)    X
or for commercial purposes, other that  NAME OF COMMITTEE (In Full)	ports and Statements may not be sold or used by any person using the name and address of any political committee to NS INC. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial KENNETH KLEPPER Mailing Address 295 GLEN P  City FRANKLIN LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	<u>'</u>	Date of Receipt  M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.80	
Full Name (Last, First, Middle Initi- MR JON KLINE Mailing Address 36 CORTLAN	<u> </u>	Date of Receipt  1 2 0 8 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42446
MAHWAH	NJ 07430	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.54
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS PLANNING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1314.04	
Full Name (Last, First, Middle Inition MR BRADFORD KOGEN	al)	Date of Receipt
Mailing Address 555 FORBUS	SH STREET	12 08 2007
City	State Zip Code	Transaction ID: INC.A.42404
BOONTON	NJ 07005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLIENT RETAIL	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	
OUDTOTAL (D Tir. D.	(optional)	267.84

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 310 (check only one)    X
or f	y information copied from such Reports and S or commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	solicit contributions from such committee.
• .	Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI Mailing Address 920 CLARK STREET  City BOWLING GREEN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State OH C Occupatio SR NATI	Zip Code 43402 n _ ACCT EXEC	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42134  Amount of Each Receipt this Period  50.00
	Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate	e Year-to-Date ▼ 1300.00	
	MS JOANN KRENITSKY  Mailing Address 143 DEERFIELD TER	RACE		Date of Receipt  1 2 0 8 2 0 0 7
	City	State	Zip Code	Transaction ID: INC.A.42164
	MAHWAH  FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR 6	n BUS PLANNING & ADMIN	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
	Full Name (Last, First, Middle Initial) MS BARBARA KRZAK Mailing Address 495 ISLAND WAY			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.42333
	FRANKLIN LAKES  FEC ID number of contributing federal political committee.	C	07417	Amount of Each Receipt this Period  55.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP E-CC	n DM STRATEGY & DELIVERY	<del>,</del>
	Receipt For:  Primary General  Other (specify) ▼	. '	e Year-to-Date ▼ 1430.00	
SI	JBTOTAL of Receipts This Page (optional)			130.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 310 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MICHAEL KRZAN Mailing Address 2735 YORK RD			Date of Receipt  1 2 0 8 2 0 0 7
City COLUMBUS FEC ID number of contributing	State OH	Zip Code 43221	Transaction ID: INC.A.42385  Amount of Each Receipt this Period  50.00
Receipt For:  Primary  Other (specify) ▼	Occupation REGION	n AL VP PHARMACIES Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR MANOJ KUMAR Mailing Address 7 SUNRISE WAY			Date of Receipt  1 2 0 8 2 0 0 7
City TOWACO	State NJ	Zip Code 07082	Transaction ID: INC.A.42322  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT REQUIREMENTS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	]
Full Name (Last, First, Middle Initial) MS CYNTHIA LAUBACHER			Date of Receipt
Mailing Address 7017 COBALT WAY	Y 		12 08 7 2007
City CITRUS HEIGHTS	State CA	Zip Code 95621	Transaction ID: INC.A.42282  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		125.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n GOVERNMENT AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2950.00	
SUBTOTAL of Receipts This Page (optional	l)	<b>)</b>	200.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to c. POLITICAL ACTION COMMITTEE (a.k.a.)	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JOSEPH LENZ Mailing Address 6 SHERMAN AVE  City WALDWICK FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07463  C  Occupation SR DIR MARKET STRATEGY Aggregate Year-to-Date  650.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) MR ROBERT LONG Mailing Address 18 HARLIND TERR  City RAMSEY FEC ID number of contributing	State Zip Code NJ 07446	Date of Receipt  M M M / D D M 2 0 0 7  Transaction ID: INC.A.42273  Amount of Each Receipt this Period
Receipt For:  Primary  Other (specify)	Occupation SR NATL ACCT EXEC  Aggregate Year-to-Date  725.00	50.00
Full Name (Last, First, Middle Initial) MR ROSS LUCE Mailing Address 1066 WEST GROV	State Zip Code	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42176
GIBSONIA  FEC ID number of contributing federal political committee.	PA 15044	Amount of Each Receipt this Period  15.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation VP OPS  Aggregate Year-to-Date ▼  780.00	
SUBTOTAL of Receipts This Page (optional	)	90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 310 (check only one)    X   11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS DEBRA LUDGATE  Mailing Address 238 WOODLAND AV  City  SUMMIT  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify)	State Zip Code NJ 07901  C  Occupation SR DIR MARKETING  Aggregate Year-to-Date ▼  650.00	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42225  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS VERONA MACMAHON Mailing Address 1504 WEST CULLOI UNIT G City CHICAGO FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	M AVE  State Zip Code IL 60613  C  Occupation DIR ACCT MGMT  Aggregate Year-to-Date ▼  650.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR MICHAEL MAHON Mailing Address 64 PHEASANT HILL  City WEST HARTFORD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	DRIVE  State Zip Code CT 06107  C  Occupation DIR SALES  Aggregate Year-to-Date  260.00	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42484  Amount of Each Receipt this Period  10.00
SUBTOTAL of Receipts This Page (optional)		60.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	a. Medco Health PAC)		
Α.	Full Name (Last, First, Middle Initial) MR KENNETH MALLEY Mailing Address 764 W. SADDLE RIVE	Date of Receipt		
	- 764 W. SADDLE RIVE			12 08 2007
	City	State	Zip Code	Transaction ID: INC.A.42209
	HO HO KUS	NJ	07423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	on DUCT & CHANNEL MKTING	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1300.00	
_ В.	Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO	Date of Receipt		
	Mailing Address 33 HICKORY TAVER	12 08 2007		
	City	State	Zip Code	Transaction ID: INC.A.42087
	GILLETTE	NJ	07933	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA	NCE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
_ >.	Full Name (Last, First, Middle Initial) MS ILENE MARCUS	Date of Receipt		
	Mailing Address 97 BLUEBERRY DR	12 08 7 2007		
	City WOODCLIFF LAKE DR	State NJ	Zip Code 07675	Transaction ID: INC.A.42342  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on FINANCE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
Γ,	SUBTOTAL of Receipts This Page (optional) .			110.00
	FOTAL This Period (last page this line number	only)	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 310 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR GARY MARGIOTTA			Date of Receipt
Mailing Address 8 HEATHER HILL W			12 08 7 2007
City	State	Zip Code	Transaction ID: INC.A.42203
MENDHAM	NJ	07945	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CC		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	260.00	
Full Name (Last, First, Middle Initial) MR JOSEPH MARINELLI	•		Date of Receipt
Mailing Address 351 SOUND BEACH	AVENUE		12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42161
OLD GREENWICH	CT	06870	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MED	n DICARE OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MS TAMARA MARSHALL			Date of Receipt
Mailing Address W144 N7150 TERRA	ACE DRIVE		12 08 7 9 9 9
City	State	Zip Code	Transaction ID: INC.A.42233
MENOMONEE FALLS	WI	53051	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n _ ACCT EXEC	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	725.00	
SUBTOTAL of Receipts This Page (optional)		<b>)</b>	85.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 17		
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and addr	not be sold or used by any person ess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	CTION COMMITTEE (a.k.a	ı. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MR TODD MARTIN			Date of Receipt		
Mailing Address 11825 SHEPPARDS  City	CROSSING  State	Zip Code	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42189		
CLARKSVILLE	MD	21029	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		192.30		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERAL	_ MGR			
Receipt For:  Primary General  Other (specify) ▼	Aggregate `	Year-to-Date ▼ 4999.80			
Full Name (Last, First, Middle Initial) MR ROBERT MATCHETT			Date of Receipt		
Mailing Address 27 LAKEVILLE RD	Mailing Address 27 LAKEVILLE RD				
City	State	Zip Code	Transaction ID: INC.A.42144		
SUSSEX	NJ	07461	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECH	INOLOGY			
Receipt For:  Primary General  Other (specify) ▼	Aggregate `	Year-to-Date ▼ 650.00			
Full Name (Last, First, Middle Initial) MR JEFFREY MAY			Date of Receipt		
City	State	Zip Code	Transaction ID: INC.A.42376		
HILLSDALE FEC ID number of contributing federal political committee.	C	07642	Amount of Each Receipt this Period 192.30		
Name of Employer MEDGO HEALTH SOLUTIONS	Occupation SVP DRU	G DISTRIB & CONTROL			
Receipt For:  Primary General  Other (specify) ▼	<del>-, '</del>	Year-to-Date ▼ 4999.80			
SUBTOTAL of Receipts This Page (optional)			409.60		
TOTAL This Period (last page this line number		<u> </u>			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR TERENCE MAYTIN Mailing Address 496 FRANKLIN AVE  City WYCKOFF	State NJ	Zip Code 07481	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42184  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		n E-COM STRAT & DELI	10.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS PATRICIA MAZZONE  Mailing Address 56 PENOBSCOT ST		260.00	Date of Receipt
City CLIFTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	, ·	Zip Code 07013 n PRODUCT SVCS e Year-to-Date ▼	Transaction ID: INC.A.42279  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR SHAMUS MC GUIRE Mailing Address 11 JARDINE COURT  City MORRIS PLAINS  FEC ID number of contributing	State NJ	Zip Code 07950	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42214  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	. '	n ES AND MARKETING e Year-to-Date ▼ 1300.00	50.00
SUBTOTAL of Receipts This Page (optional)		<b>)</b>	85.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 310 (check only one)    X			
, A	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	on for the purpose of soliciting contributions					
	MEDCO HEALTH SOLUTIONS INC.	MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. M					
۸.	Full Name (Last, First, Middle Initial) MR DOUG MCCANN	Date of Receipt					
	Mailing Address 10201 E. 92ND STR	12 08 7 2007					
	City OWASSO	State OK	Zip Code 74055	Transaction ID: INC.A.42497			
	FEC ID number of contributing federal political committee.	C	74033	Amount of Each Receipt this Period 25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	on DDUCT DEVELOPMENT				
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 220.00				
	Full Name (Last, First, Middle Initial) MR THOMAS MCDONALD	Date of Receipt					
	Mailing Address 0-45 27TH ST			12 08 YYYY 2007			
	City	State	Zip Code	Transaction ID: INC.A.42325			
	FAIR LAWN	NJ	07410	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	on CHNOLOGY				
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼				
	Other (specify)		650.00				
. –	Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH	Date of Receipt					
	Mailing Address 87 ROSELAWN RD	12 08 2007					
	City	State	Zip Code	Transaction ID: INC.A.42281			
	HIGHLAND MILLS FEC ID number of contributing federal political committee.	C	10930	Amount of Each Receipt this Period  192.00			
	Name of Employer MEDCO HEALTH SOLUTIONS  VP & CO		on DUNSEL				
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 4992.00				
Γ	SUBTOTAL of Receipts This Page (optional)			242.00			

ITEMIZED REC	(FEC Form 3X) CEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X
or for commercial purp	oses, other than using the name a	nts may not be sold or used by any person and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMI MEDCO HEALT	( - /	CAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, Fi	MARA		Date of Receipt
Mailing Address	112 GREEN TERRACE WAY	12 08 2007	
City		tate Zip Code	Transaction ID: INC.A.42419
WEST MILFOR	) N	J 07480	Amount of Each Receipt this Period
FEC ID number of federal political con			192.31
Name of Employer MEDCO HEALTH	SOLUTIONS Occ	cupation P BUSINESS OPS	
Receipt For: Primary Other (specif	General	gregate Year-to-Date ▼ 5000.00	
Full Name (Last, Fi			Date of Receipt
Mailing Address	921 AMARYLLIS AVE	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City		tate Zip Code	Transaction ID: INC.A.42126
ORADELL	N	J 07649	Amount of Each Receipt this Period
FEC ID number of federal political con	mittee.		25.00
Name of Employer MEDCO HEALTH	SOLUTIONS Oct	cupation R BUSINESS PLANNING & ADMIN	
Receipt For: Primary Other (specif	General	gregate Year-to-Date ▼ 650.00	
Full Name (Last, Fi	rst, Middle Initial)		Date of Receipt
Mailing Address	CLOVER LANE		12 08 YYYY 12007
City		tate Zip Code	Transaction ID: INC.A.42093
RANDOLPH	N		Amount of Each Receipt this Period
FEC ID number of federal political con			50.00
Name of Employer MEDCO HEALTH	SOLUTIONS Oct	cupation LABOR RELATIONS	
Receipt For: Primary	Age General	gregate Year-to-Date ▼	
Other (specif		725.00	
SUBTOTAL of Recei			267.31

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS  Any information copied from such Benorts	Use separate schedule(s) for each category of the Detailed Summary Page and Statements may not be sold or used by any perso	FOR LINE NUMBER: PAGE 79 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 1				
or for commercial purposes, other than usi  NAME OF COMMITTEE (In Full)	ng the name and address of any political committee to  NC. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.				
Full Name (Last, First, Middle Initial) MRS KAREN MILLER	Full Name (Last, First, Middle Initial)					
Mailing Address 34 MACKENZIE I	Mailing Address 34 MACKENZIE LANE NORTH					
City	State Zip Code	Transaction ID: INC.A.42086				
DENVILLE	NJ 07834	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	30.00				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR FINANCE					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00					
Full Name (Last, First, Middle Initial) MR GIOVANNI MINARDI	Date of Receipt					
Mailing Address 12 LINCOLN RO	1 2 0 8 2 0 0 7					
City KINNELON	State Zip Code NJ 07405	Transaction ID: INC.A.42434  Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	25.00				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E-COM STRAT & DELI					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00					
Full Name (Last, First, Middle Initial) MR BHUPESH MISTRY	I	Date of Receipt				
Mailing Address 106 HAMBURG F	ROAD	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code	Transaction ID: INC.A.42099				
PARSIPPANY	NJ 07054	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	25.00				
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNICAL SPECIALIST					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00					
SUBTOTAL of Receipts This Page (optic	nal)	80.00				

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 310 (check only one)    X		
	Statements may not be sold or used by any person the name and address of any political committee to			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MS JULIANA MOLEK		Date of Receipt		
Mailing Address 17584 WEXFORD D  City	State Zip Code	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42196		
EDEN PRAIRIE	MN 55347	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR SPECIAL MARKETS			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00			
Full Name (Last, First, Middle Initial) MR PETER MONKHOUSE		Date of Receipt		
Mailing Address 1320 BRONCO CIR	12 08 7 2007			
City	State Zip Code	Transaction ID: INC.A.42206		
WARRINGTON  FEC ID number of contributing federal political committee.	PA 18976	Amount of Each Receipt this Period  25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BENEFIT DELIVERY SYS			
Receipt For:	Aggregate Year-to-Date ▼	_		
Primary General Other (specify) ▼	650.00			
Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY		Date of Receipt		
Mailing Address 86 WELLINGTON A	Mailing Address 86 WELLINGTON AVENUE			
City SHORT HILLS	State Zip Code NJ 07078	Transaction ID: INC.A.42076		
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  192.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHARMACEUTICAL CONTRAC	ETING		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 4992.00			
CURTOTAL of Descripts This Dags (extrangl)		242.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements mand add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) MS THERESA MORMILE			Date of Receipt
Mailing Address 59 VALLEY VIEW TER			12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42377
MONTVALE	NJ	07645	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FINA		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 380.00	
Full Name (Last, First, Middle Initial) MR RICHARD MOUNTJOY			Date of Receipt
Mailing Address 2 STONEBRIDGE RD			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.42413
<u>SPARTA</u>	NJ	07871	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 520.00	
Full Name (Last, First, Middle Initial) MR KEVIN MURPHY, JR			Date of Receipt
Mailing Address 80 PARKWAY			12 08 7 2007
City	State	Zip Code	Transaction ID: INC.A.42131
FAIRFIELD	СТ	06824	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SVP MA	n RKET STRATEGY AND DEV	,
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3451.90	
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	262.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) MS BECKY NAGLE			Date of Receipt
Mailing Address 64 WALTER AVE			12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42132
HASBROUCK HEIGHTS	NJ	07604	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MS ARLENE NELSON			Date of Receipt
Mailing Address 17 GARFIELD PLACE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.42162
RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINA		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) MR MICHAEL NICODEMO			Date of Receipt
Mailing Address 407 MEER AVE			12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42418
WYCKOFF	NJ	07481	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-CC	n DM STRATEGY & DELIVERY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	85.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  Any information copied from such Reports and S	fo D Statements may not	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 83 / 310 (check only one)    X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and address	of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS JANINE NOWATZKY  Mailing Address 24 CHEROKEE TRAII	L		Date of Receipt
City	State	Zip Code	12 08 2007
OAKLAND	NJ	21p Gode 07436	Transaction ID: INC.A.42272  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	+ +	& STRATEGIC ANAL	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MS COLLEEN O'BRIEN	ı		Date of Receipt
Mailing Address 30 BELCHER ROAD			12 08 YYYY 2007
City WARWICK	State NY	Zip Code 10990	Transaction ID: INC.A.42286  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM	OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER	I		Date of Receipt
Mailing Address 6 PARK DR SOUTH			1 2 0 8 2 0 0 7
City RYE	State NY	Zip Code 10580	Transaction ID: INC.A.42401  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-COM S	TRATEGY & DELIVERY	,
Receipt For: Primary General Other (specify)	Aggregate Yea	-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (optional) .	1	·····	85.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 310 (check only one)    X   11a			
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	NAME OF COMMITTEE (IN PUII)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. N					
A.	Full Name (Last, First, Middle Initial) MR SUNNY OGBONDA Mailing Address 79 LAUREL WOOD C						
		12 08 2007					
	City	State	Zip Code	Transaction ID: INC.A.42100			
	ROCKAWAY TOWNSHIP	NJ	07866	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS		SINESS REQUIREMENTS				
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼				
	Other (specify)		400.00				
В.	Full Name (Last, First, Middle Initial) MR MELVIN OHL	Date of Receipt					
	Mailing Address 274 E FRANKLIN TPk	12 08 7 2007					
	City	State	Zip Code	Transaction ID: INC.A.42350			
	RIDGEWOOD	NJ	07450	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		50.00			
	Name of Employer MEDCO HEALTH SOLUTIONS		CUREMENT & INVENTORY	,			
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00				
C.	Full Name (Last, First, Middle Initial) MS CLAUDINE OLSEN	•		Date of Receipt			
	Mailing Address 4 HIGHGATE CT	Mailing Address 4 HIGHGATE CT					
	City SUFFERN	State NY	Zip Code	Transaction ID: INC.A.42393			
	FEC ID number of contributing federal political committee.	C	10901	Amount of Each Receipt this Period  25.00			
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on ACCT MGMT				
	Receipt For:  Primary  General  Other (specify)	<del>, '</del>	e Year-to-Date ▼ 650.00				
	SUBTOTAL of Receipts This Page (optional)		<b>\</b>	100.00			
	TOTAL This Period (last page this line number						

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personne name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ALEXANDER ONIK Mailing Address 1 SCHINDLER CT  City UPPER SADDLE RIVER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary Other (specify)	State Zip Code NJ 07458  C  Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date   650.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.42485  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  MS NATALYA ONIK  Mailing Address 1 SCHINDLER CT  City  UPPER SADDLE RIVER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NJ 07458  C  Occupation DIR TECHNOLOGY  Aggregate Year-to-Date   650.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.42256  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS LUDIVINA PACAMARRA Mailing Address 4 TEAK COURT  City RINGWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07456  C  Occupation EXEC DIR TECHNOLOGY  Aggregate Year-to-Date   1300.00	Date of Receipt  M M / D D D / Y Y Y Y Y  1 2 0 0 7  Transaction ID: INC.A.42339  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional)	<b></b>	100.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persor g the name and address of any political committee to sold. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS DAWN PAGANO  Mailing Address 185 PASCACK RO		Date of Receipt
		12 08 2007
City	State Zip Code NJ 07656	Transaction ID: INC.A.42338
PARK RIDGE  FEC ID number of contributing federal political committee.	NJ 07656	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP COO	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial)  MR RICHARD PAGANO		Date of Receipt
Mailing Address 185 PASCACK RE	)	12 08 2007
City PARK RIDGE	State Zip Code NJ 07656	Transaction ID: INC.A.42334  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS REQUIREMENTS	- -
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MRS MICHELE PAIGE		Date of Receipt
Mailing Address 12 MILLBROOK C	COURT	12
City <u>LIVINGSTON</u>	State Zip Code NJ 07039	Transaction ID: INC.A.42251  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MARKET STRATEGY	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (option	nal)	100.00

ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 310 (check only one)    X   11a
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	lress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR RICHARD PALOMBO Mailing Address 19 E. HOLLYWOOI		<u> </u>	Date of Receipt  1 2 0 8 2 0 0 7
City BEESLEY'S POINT	State NJ	Zip Code 08223	Transaction ID: INC.A.42448  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		9.61
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		FESSIONAL PRACTICES Year-to-Date   249.86	
Full Name (Last, First, Middle Initial) MR JAY PATEL Mailing Address 14 BROWNSTONE	TERRACE		Date of Receipt  1 2 0 8 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42473
HAWTHORNE  FEC ID number of contributing federal political committee.	NJ C	07506	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR E-CC	DM STRAT & DELIV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR MATTHEW PATELLA Mailing Address 30 TAM O SHANTE	R DRIVE		Date of Receipt  1 2 0 8 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42117
MAHWAH  FEC ID number of contributing federal political committee.	NJ C	07430	Amount of Each Receipt this Period  10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional	)		44.61

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 88/310   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL <i>F</i>	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ROBERT PELLEGRINI			Date of Receipt
Mailing Address 211 WILTSIE COU	RT		M M / D D / Y Y Y Y Y Y 1 1 2 0 8 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42217
WYCKOFF  FEC ID number of contributing federal political committee.	NJ C	07481	Amount of Each Receipt this Period  20.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	n TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	e Year-to-Date ▼ 340.00	
Full Name (Last, First, Middle Initial) MR MICHAEL PETEROY	<u> </u>		Date of Receipt
Mailing Address 4769 STAVANGER	R LANE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LAS VEGAS	State NV	Zip Code	Transaction ID: INC.A.42320
FEC ID number of contributing federal political committee.	C	89147	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	n DDUCT DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	- <del>                                    </del>	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR NATHAN PETERSON			Date of Receipt
Mailing Address 1771 PRESCOTT L	_ANE		M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
City CHASKA	State MN	Zip Code 55318	Transaction ID: INC.A.42229  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33310	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	n CCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	<del>- 1 '</del>	Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional	I SI)		70.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 310 (check only one)    X
NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS PETTYES Mailing Address 8522 UPLAND LN	C. POLITICAL ACTION COMMITTEE (a.k.a	Date of Receipt
City MAPLE GROVE	State Zip Code MN 55311	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42183  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	50.00
Receipt For:  Primary General  Other (specify) ▼	GENERAL MGR GROUP  Aggregate Year-to-Date ▼  1300.00	
Full Name (Last, First, Middle Initial) MS JUDITH PLATKIN Mailing Address 29 BLACKWELL A	VE	Date of Receipt  1 2 0 8 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42088
MORRISTOWN  FEC ID number of contributing federal political committee.	NJ 07960	Amount of Each Receipt this Period  200.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2200.00	]
Full Name (Last, First, Middle Initial) MS JANET PORAT		Date of Receipt
Mailing Address 5 CRABAPPLE CT		12 08 2007
City	State Zip Code	Transaction ID: INC.A.42187
MONSEY  FEC ID number of contributing federal political committee.	NY 10952	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS REQUIREMENTS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (option)	, (k	275.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 310 (check only one)    X
7	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS LYDIA POTTER			Date of Receipt
	Mailing Address 19642 S.W. 88 LOOP	,		12 08 7 2007
	City	State	Zip Code	Transaction ID: INC.A.42403
	DUNNELLON	FL	34432	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		650.00	
_ В.	Full Name (Last, First, Middle Initial) MR NEIL PREZIOSO			Date of Receipt
	Mailing Address 10258 WINDSOR WA	λY		12 / 08 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.42304
	POWELL	OH	43065	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP HLTH	n I CARE OPS/FORMULARY	/CDP
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1300.00	
_ C.	Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE			Date of Receipt
	Mailing Address 875 ALEXANDRIA CT	Γ		12 08 7 9 9 9
	City RAMSEY	State NJ	Zip Code 07446	Transaction ID: INC.A.42265
	FEC ID number of contributing federal political committee.	C	07440	Amount of Each Receipt this Period 192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP HR	n	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 4999.80	
Г		1		

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial) MR ROBERT PRITCHET			Date of Receipt
	Mailing Address 135 HOLLYBERRY DR  City	State	Zip Code	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42369
	HOPEWELL JUNCTION	NY	12533	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n CONTRACT ADMINISTRATI	 ΟΝ
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
- В.	Full Name (Last, First, Middle Initial)  MR MARK PROULX  Mailing Address 20 PRANDY PLOCE DO			Date of Receipt
	Mailing Address 20 BRANDY RIDGE RO	JAD		12 08 2007
	City	State	Zip Code	Transaction ID: INC.A.42439
	SPARTA	NJ	07871	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PHA	<sup>n</sup> ARMACY & CUST SVC OPS	:
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	5000.00	
С. С.	Full Name (Last, First, Middle Initial) SYED QUADRI			Date of Receipt
	Mailing Address 6040 KENNEDY BLVD APT 30N	EAST		12 08 7 2007
	City WEST NEW YORK	State NJ	Zip Code 07093	Transaction ID: INC.A.42433  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07030	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRIV		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼	0 0	400.00	
	SUBTOTAL of Receipts This Page (optional)			242.31
f	TOTAL This Period (last page this line number of		<u> </u>	

	ILE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 310 (check only one)    X
or for comme	on copied from such Reports and S rcial purposes, other than using the COMMITTEE (In Full)	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO	HEALTH SOLUTIONS INC. I	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
MR GILBE	(Last, First, Middle Initial) RT RAINES Idress 800 SANDY TRAIL			Date of Receipt
	MISSS 000 SANDT THAIL			12 08 2007
City KELLER		State TX	Zip Code 76248	Transaction ID: INC.A.42458  Amount of Each Receipt this Period
	umber of contributing litical committee.	С		25.00
	Employer HEALTH SOLUTIONS	Occupatio DIR HR	n	
Receipt For Prim Other		Aggregate	e Year-to-Date ▼ 610.00	
Full Name	(Last, First, Middle Initial) CES RAO			Date of Receipt
Mailing Ad	Idress 19 ROSS ROAD			12 08 2007
City		State	Zip Code	Transaction ID: INC.A.42112
SCARSE		NY	10583	Amount of Each Receipt this Period
federal pol	umber of contributing litical committee.	C		25.00
Name of E MEDCO F	Employer HEALTH SOLUTIONS	Occupatio SR DIR I	n PRIVACY	
Receipt Fo		Aggregate	e Year-to-Date ▼	
	er (specify)		650.00	
Full Name	(Last, First, Middle Initial) N REED			Date of Receipt
Mailing Ad	dress 4 ANTLER CT			12 08 2007
City	•••	State	Zip Code	Transaction ID: INC.A.42358
	AN umber of contributing litical committee.	C	07747	Amount of Each Receipt this Period 65.38
Name of E MEDCO H	Employer HEALTH SOLUTIONS	Occupatio SVP FIN	n ANCE & CHIEF FIN OFFCF	
Receipt Fo		Aggregate	e Year-to-Date ▼ 5000.00	
SUPTOTAL	of Receipts This Page (optional)	1		115.38

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	) <b>^</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 93/310   (check only one)     X   11a
Any information copied from such Reports or for commercial purposes, other than usin	and Statements may	not be sold or used by any persolress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS II	NC. POLITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MRS MONICA REED			Date of Receipt
Mailing Address 8475 DUNHAM S	TATION DRIVE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TAMPA	State FL	Zip Code 33647	Transaction ID: INC.A.42262  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33047	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	RM PRACTICE	
Receipt For:  Primary  General  Other (specify)		Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR THOMAS REINCKENS			Date of Receipt
Mailing Address 22 BARTLETT AV	/E.		M M / D D / Y Y Y Y Y 1 1 2 0 8 2 0 0 7
City NORWALK	State CT	Zip Code 06850	Transaction ID: INC.A.42204
FEC ID number of contributing federal political committee.	C	00000	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	R RECONCILIATION	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR VICTOR RENNA			Date of Receipt
Mailing Address 8 CARLA ANN C	Γ		M M / D D / Y Y Y Y Y 1 1 2 0 8 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42405
FLANDERS  FEC ID number of contributing federal political committee.	NJ C	07836	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	OUREMENT & INVENTORY	
Receipt For:  Primary General  Other (specify) ▼	<del>'</del>	Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (option	nal)	<b>_</b>	125.00

SCHEDULE A (FEC Form 3. ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 94 / 310   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	and Statements may g the name and add	not be sold or used by any persol ress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR JOSEPH REYNOLDS			Date of Receipt
Mailing Address 412 RIVER MEWS	S LANE		M M / D D / Y Y Y Y Y Y 1 1 2 0 8 2 0 0 7
City EDGEWATER	State NJ	Zip Code 07020	Transaction ID: INC.A.42455
FEC ID number of contributing federal political committee.	C	07020	Amount of Each Receipt this Period  70.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	R TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 1820.00	
Full Name (Last, First, Middle Initial) MR DAVID ROBARGE	<u> </u>		Date of Receipt
Mailing Address 4565 QUEENSLAN	ND LN N		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City MINNEAPOLIS	State MN	Zip Code 55446	Transaction ID: INC.A.42143  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33440	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	IICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MS SORAYA RODRIGUEZ-BALZAC			Date of Receipt
Mailing Address 22 PAPOOSE TRA	AIL		1 2 0 8 2 0 0 7
City ANDOVER	State NJ	Zip Code 07821	Transaction ID: INC.A.42454
FEC ID number of contributing federal political committee.	C	07021	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PUB	LIC AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	<del>- + -</del>	Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (option			120.00

ITEMIZED RECEIPTS	<b>^</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 95/310   (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO			Date of Receipt
Mailing Address 96 LEHMANN STR	REET		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MAHWAH	State NJ	Zip Code	Transaction ID: INC.A.42202
FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period  192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRESIDE	n ENT SYSTEMED	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 4999.80	
Full Name (Last, First, Middle Initial) MS DONNA ROSEN			Date of Receipt
Mailing Address 7 RED OAK LANE			M M / D D / Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.42370
FEC ID number of contributing federal political committee.	C	07403	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS-	CLINICAL TECH	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR CHRISTOPHERJOHN ROWLAND			Date of Receipt
Mailing Address 16725 OLIVE CIRC	CLE		M M / D D / Y Y Y Y Y 1 1 2 0 8 2 0 0 7
City FOUNTAIN VALLEY	State CA	Zip Code 92708	Transaction ID: INC.A.42103
FEC ID number of contributing federal political committee.	C	92700	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	CCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	<del>- 1 '</del>	Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (options	al)		252.30

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 96/310   (check only one)     X   11a
Any i	information copied from such Reports and Sir commercial purposes, other than using the	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	AME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	OLITICAL A	ACTION COMMITTEE (a.k.a	Medco Health PAC)
	ull Name (Last, First, Middle Initial) IR RICHARD RUBINO			Date of Receipt
M	lailing Address 5201 RIO VISTA DRIV	E		12 08 2007
	ity ⁄AHWAH	State NJ	Zip Code 07430	Transaction ID: INC.A.42366
F	EC ID number of contributing ederal political committee.	C	07450	Amount of Each Receipt this Period  193.00
N N	ame of Employer IEDCO HEALTH SOLUTIONS	Occupation SVP & C	n ONTROLLER	
R	eceipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 5000.00	
	ull Name (Last, First, Middle Initial) IR STEVEN RUSSEK			Date of Receipt
_	lailing Address 21 SKY TOP RIDGE			12 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ity DAKLAND	State NJ	Zip Code 07436	Transaction ID: INC.A.42219
F	EC ID number of contributing deral political committee.	C	07430	Amount of Each Receipt this Period  50.00
N N	ame of Employer IEDCO HEALTH SOLUTIONS	Occupation VP FORI	n MULARY & COVERAGE MG	
R	eceipt For: Primary General Other (specify)		e Year-to-Date ▼ 1300.00	
	ull Name (Last, First, Middle Initial) IR ANTHONY RUSSO			Date of Receipt
_	lailing Address 66 FINCH RD			M M / D D / Y Y Y Y Y 1 1 2 0 8 2 0 0 7
	ity RINGWOOD	State NJ	Zip Code 07456	Transaction ID: INC.A.42315
F	EC ID number of contributing ederal political committee.	C	07456	Amount of Each Receipt this Period  20.00
N N	ame of Employer IEDCO HEALTH SOLUTIONS	Occupation VP PROI		
R	eceipt For: Primary General Other (specify)		e Year-to-Date ▼ 520.00	
SUE	BTOTAL of Receipts This Page (optional)			263.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal the name and address of any political committee to committee to committee. POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS MARY RYAN Mailing Address 456 RICHMOND AV	/FAILIE	Date of Receipt
City	State Zip Code	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42357
MAPLEWOOD  FEC ID number of contributing federal political committee.	NJ 07040	Amount of Each Receipt this Period 78.34
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation VP PHARMACY REGULATORY Aggregate Year-to-Date ▼	
Other (specify) ▼  Full Name (Last, First, Middle Initial)  MISS CYNTHIA RYLANDS	2036.84	Date of Receipt
Mailing Address 4836 MIDDLE RD		1 2 0 8 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42386
ALLISON PARK FEC ID number of contributing federal political committee.	PA 15101	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS REQUIREMENTS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR MICHAEL SARDONE Mailing Address 7 AHERN WAY		Date of Receipt  1 2 0 8 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42246
WEST ORANGE FEC ID number of contributing	NJ 07052	Amount of Each Receipt this Period 25.00
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL THERAPEUTICS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
	l)	128.34

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MATTHEW SARDY  Mailing Address 230 FAIRFIELD AVE.  City RIDGEWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State NJ  C  Occupatio SR DIR I	Zip Code 07450 n BUS PLANNING & ADMIN	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42147  Amount of Each Receipt this Period  25.00
Other (specify)  Full Name (Last, First, Middle Initial) MS BETH SAVARE Mailing Address 27 JONES LN  City BLAIRSTOWN	State NJ	Zip Code 07825	Date of Receipt  M M / D D / Y Y Y Y Y  1 2 0 0 7  Transaction ID: INC.A.42362  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		n PHARM OPS e Year-to-Date ▼ 650.00	25.00
Full Name (Last, First, Middle Initial) MS TRINA SAYLER Mailing Address 56 LAKESIDE DRIVE  City RAMSEY  FEC ID number of contributing	State NJ	Zip Code 07446	Date of Receipt    M M
Receipt For:  Primary  Other (specify)	<del>- '</del>	n TECHNOLOGY e Year-to-Date ▼	15.00
SUBTOTAL of Receipts This Page (optional) .		·····	65.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 99 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/	POLITICAL ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR DAVID SCHLETT		Date of Receipt
Mailing Address 339 GRAMERCY PL  City	State Zip Code	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42365
GLEN ROCK	NJ 07452	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ANALYTICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR FRANK SCHULTE		Date of Receipt
Mailing Address 2121 AMERICA'S CU	PCIR	12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.42198
LAS VEGAS	NV 89117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGIONAL VP PHARMACIES	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	_
Other (specify) ▼	1300.00	
Full Name (Last, First, Middle Initial) MR ALLEN SCHWARTZ		Date of Receipt
Mailing Address 3556 DAVIS		12 08 YYYY 12007
City	State Zip Code	Transaction ID: INC.A.42139
EVANSTON  FEC ID number of contributing federal political committee.	IL 60203	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1080.00	
SUBTOTAL of Receipts This Page (optional)		125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 310 (check only one)    X		
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal the name and address of any political committee to committee to committee. POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) MS CYNTHIA SCOTT Mailing Address 18650 BEARPATH  City EDEN PRAIRIE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code MN 55437  C Occupation	Date of Receipt  M M M / D D M 2007  Transaction ID: INC.A.42091  Amount of Each Receipt this Period  50.00		
Receipt For: Primary General Other (specify)	VP CLINICAL PROG DEV  Aggregate Year-to-Date ▼  1300.00			
Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT Mailing Address 7330 EVEREST LA	NE - NORTH	Date of Receipt  1 2 0 8 2 0 0 7		
City	State Zip Code	Transaction ID: INC.A.42407		
MAPLE GROVE  FEC ID number of contributing federal political committee.	MN 55311	Amount of Each Receipt this Period  50.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00			
Full Name (Last, First, Middle Initial) MR LEONARD SCOTT Mailing Address 13514 MOTTLEST(				
City	State Zip Code	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42293		
PICKERINGTON  FEC ID number of contributing federal political committee.	OH 43147	Amount of Each Receipt this Period  25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REG DIR ACCT MGMT			
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00			
	l)	125.00		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the ailed Summary Page	FOR LINE NUMBER: PAGE 101 / 310 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and address o	f any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS MONICA SCOZZARE  Mailing Address 3021 E MILLCREI	EK ROAD		Date of Receipt  1 2 0 8 2 0 0 7
City SALT LAKE CITY FEC ID number of contributing		ip Code 4109	Transaction ID: INC.A.42084  Amount of Each Receipt this Period  50.00
Receipt For:  Primary  Other (specify)   General  Other (specify)   General	Occupation EXEC DIR CLI Aggregate Year-t		
Full Name (Last, First, Middle Initial) MR ROBERT SENDEWICZ Mailing Address 1220 CROSSING	WAY		Date of Receipt    M
City WAYNE FEC ID number of contributing	NJ 0	p Code 7470	Transaction ID: INC.A.42114  Amount of Each Receipt this Period
Receipt For:  Primary  Other (specify)	Occupation SR DIR TECH Aggregate Year-t		25.00
Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV Mailing Address 66 PROSPECT A	VE		Date of Receipt  1 2 0 8 2 0 0 7
City WESTWOOD FEC ID number of contributing		p Code 7675	Transaction ID: INC.A.42430  Amount of Each Receipt this Period  50.00
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS	DEV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-t	o-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (option	nal)		125.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 310 (check only one)    X
or for	nformation copied from such Reports and St commercial purposes, other than using the AME OF COMMITTEE (In Full) IEDCO HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	o solicit contributions from such committee.
FL <u>M</u>	ull Name (Last, First, Middle Initial) R THOMAS SHANAHAN, III ailing Address 266 BRUSHY CREEK	AVE	`	Date of Receipt  1 2 0 8 2 0 0 7
Ci		State	Zip Code	Transaction ID: INC.A.42278
FE	AS VEGAS  EC ID number of contributing deral political committee.	C	89148	Amount of Each Receipt this Period 45.00
_	eme of Employer EDCO HEALTH SOLUTIONS  eceipt For: Primary General Other (specify)	Occupation DIR OPS Aggregate		]
. <u>M</u>	ull Name (Last, First, Middle Initial) R JOHN SHEA ailing Address 62 FRANKLIN TURNPI	KE		Date of Receipt  1 2 0 8 2 0 0 7
Ci	ty	State	Zip Code	Transaction ID: INC.A.42098
<u>A</u>	LLENDALE	NJ	07401	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	C		40.00
Na M	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio ASST CO		
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1040.00	
	ull Name (Last, First, Middle Initial) R FRANK SHEEHY			Date of Receipt
M	ailing Address 119 HAMILTON RD			12 08 2007
Ci		State	Zip Code	Transaction ID: INC.A.42155
_	IDGEWOOD	NJ	07450	Amount of Each Receipt this Period
	EC ID number of contributing deral political committee.	С		50.00
Na M	ame of Employer EDCO HEALTH SOLUTIONS	Occupatio GENERA		
Re	eceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2600.00	
SUB	TOTAL of Receipts This Page (optional)			135.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 310 (check only one)    X
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) ALEXANDER SHEKHDAR			Date of Receipt
	Mailing Address 211 CROYDON AVEN	12 08 7 2007		
	City ROCKVILLE	State MD	Zip Code 20850	Transaction ID: INC.A.42500  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUS	on SINESS & MKT DEV	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	
В.	Full Name (Last, First, Middle Initial) MR PETER SHERMAN			Date of Receipt
	Mailing Address 139 GATES AVENUE			12 08 7 2007
	City MONTCLAIR	State NJ	Zip Code 07042	Transaction ID: INC.A.42077
	FEC ID number of contributing federal political committee.	C	07042	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MANAG	on ING COUNSEL	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
_ C.	Full Name (Last, First, Middle Initial) MR JAMES SHIVAS			Date of Receipt
	Mailing Address 18 PROSPECT AVE	12 08 2007		
	City NORTH ARLINGTON	State NJ	Zip Code 07031	Transaction ID: INC.A.42242  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRI		
	Receipt For:  Primary  General  Other (specify) ▼	+ +	e Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional)			90.00
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR ELWOOD SIDES III  Mailing Address 150 CLAREMONT AV  City  LONG BEACH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State CA C Occupatio VP SALE		Date of Receipt    M
Full Name (Last, First, Middle Initial)  MS ANNE SIGILLITO  Mailing Address 178 LEXINGTON AV  City  WESTWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State NJ C Occupatio SR DIR (	Zip Code 07675 n GENERIC STRAT & CUST E e Year-to-Date ▼	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42081  Amount of Each Receipt this Period  10.00
Full Name (Last, First, Middle Initial) MS JODI SILBERMANN Mailing Address 16 TULIP LANE  City RANDOLPH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	<del>-                                    </del>	Zip Code 07869  n FINANCE e Year-to-Date  260.00	Date of Receipt    M   M   D   D   2007   Transaction ID: INC.A.42378   Amount of Each Receipt this Period   10.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		•	45.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
A.	Full Name (Last, First, Middle Initial)  JEFFREY SIMEK  Mailing Address 704 SAW PALMETTO	COURT		Date of Receipt  1 2 0 8 2 0 0 7
	City PORT ORANGE	State FL	Zip Code 32128	Transaction ID: INC.A.42258  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS	. '	P COMMUNICATIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	
В.	Full Name (Last, First, Middle Initial)  MR LEE SIMON  Mailing Address 2390 GREENVIEW RO	Date of Receipt		
		12 08 2007		
	City NORTHBROOK	State II	Zip Code 60062	Transaction ID: INC.A.42414  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00002	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio GENERA	n AL MGR GROUP	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
- C.	Full Name (Last, First, Middle Initial) MR JEFFREY SINKO			Date of Receipt
	Mailing Address 10 CHERRY TREE LA	NE		12 08 2007
	City	State	Zip Code	Transaction ID: INC.A.42288
	KINNELON FEC ID number of contributing federal political committee.	C	07405	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP & CC		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
	SUBTOTAL of Receipts This Page (optional)			292.31
ļ	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC ITEMIZED RECEIPT	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, oth  NAME OF COMMITTEE (Ir	her than using the name and ad n Full)	dress of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
		ACTION COMMITTEE (a.k.	a. Medco Health PAC)
Full Name (Last, First, Midd MR WILLIAM SIRICO	lle Initial)		Date of Receipt
Mailing Address 564 DA	LE COURT EAST		12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42113
RIVER VALE FEC ID number of contribut federal political committee.	ing NJ	07675	Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLUTI	SR DIR	TECHNOLOGY	
Receipt For:  Primary Gen  Other (specify) ▼		e Year-to-Date ▼ 780.00	
Full Name (Last, First, Midd MR DAVID SITVER	lle Initial)		Date of Receipt
Mailing Address 24 YOR	RKSHIRE AVE		12 08 2007
City SUFFERN	State NY	Zip Code 10901	Transaction ID: INC.A.42241  Amount of Each Receipt this Period
FEC ID number of contribut federal political committee.	ing		25.00
Name of Employer MEDCO HEALTH SOLUTION	ONS Occupation SR DIR	n TECHNOLOGY	
Receipt For:  Primary Gen  Other (specify) ▼		e Year-to-Date ▼ 650.00	
Full Name (Last, First, Midd	lle Initial)		Date of Receipt
-	ENDALE RD		12 08 2007
City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.42244  Amount of Each Receipt this Period
FEC ID number of contribut federal political committee.	ing		25.00
Name of Employer MEDCO HEALTH SOLUTION	Ons Occupation SR DIR	on PUBLIC AFFAIRS	
Receipt For:  Primary Gen  Other (specify) ▼		e Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This	Page (optional)		80.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 310 (check only one)    X
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. I	name and ad	dress of any political committee to	o solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial)  MS COLLEEN SMITH  Mailing Address 1241 CHENILLE CIR  City  WESTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State FL C	Zip Code 33327	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 0 7  Transaction ID: INC.A.42223  Amount of Each Receipt this Period  10.00
_	Receipt For:  Primary General  Other (specify) ▼		CLINICAL SVCS  e Year-to-Date ▼  260.00	
3.	Full Name (Last, First, Middle Initial) MR ROBERT SMITH  Mailing Address 40 JOSHUA DR T			Date of Receipt  1 2 0 8 2 0 0 7
	City	State	Zip Code	Transaction ID: INC.A.42384
	RAMSEY	NJ	07446	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	n	
	Receipt For:		e Year-to-Date <b>V</b>	
	Primary General Other (specify) ▼		2600.00	]
_	Full Name (Last, First, Middle Initial) MR DAVID SNOW, JR	Date of Receipt		
	Mailing Address 23 CEDAR GATE ROA	12 08 2007		
	City	State	Zip Code	Transaction ID: INC.A.42447
	DARIEN	CT	06820	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		192.31
	Name of Employer MEDCO HEALTH SOLUTIONS		AN & CEO	
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 5000.00	
	SUBTOTAL of Receipts This Page (optional)			252.31

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Report or for commercial purposes, other than u	s and Statements may not be sold or used by any personsing the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
MEDCO HEALTH SOLUTIONS	INC. POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)	
Full Name (Last, First, Middle Initial) MR ALAN SOKALER		Date of Receipt	
Mailing Address 30 MICHELLE V		12 08 7 2007	
City PINE BROOK	State Zip Code NJ 07058	Transaction ID: INC.A.42472  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	50.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINANCE		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00		
Full Name (Last, First, Middle Initial)  MS JENNIFER SPIDLE  Mailing Address 21625 E. MERIN	NETHER LANE	Date of Receipt	
City LIBERTY LAKE	State Zip Code WA 99019	Transaction ID: INC.A.42306  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С	25.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 737.50		
Full Name (Last, First, Middle Initial) MR RALPH STAIANO		Date of Receipt	
Mailing Address 1 LAMBROS DR	RIVE	M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y	
City MONROE	State Zip Code NY 10950	Transaction ID: INC.A.42092	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  25.00	
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS REQUIREMENTS	<del>-</del> S	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		
SUBTOTAL of Receipts This Page (opt	ional)	100.00	
	number only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 109 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR CHRISTOPHER STATEN Mailing Address 7 FOREST LAKE	DR	Date of Receipt  1 2 0 8 2 0 0 7
City WEST HARRISON	State Zip Code NY 10604	Transaction ID: INC.A.42368  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP VP FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MS JILL STEARNS Mailing Address 13130 HALSELL [	DR	Date of Receipt  1 2 0 8 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42417
AUSTIN	TX 78732	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR CRAIG STEEL		Date of Receipt
Mailing Address 122 DEMAREST A	AVENUE	12 08 2007
City	State Zip Code	Transaction ID: INC.A.42190
EMERSON FEC ID number of contributing federal political committee.	NJ 07630	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (option	nal)	125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary P	the Coneck only one)
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	name and address of any political cor	any person for the purpose of soliciting contributions nmittee to solicit contributions from such committee.  EE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS SUSAN STEELE Mailing Address 501 CONTINENTAL E  City SAGAMORE HILLS FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code OH 44067  C  Occupation NATL ACCT EXEC  Aggregate Year-to-Date	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR STANLEY STEFANSKI Mailing Address 24 CASTLETON DRIV  City HIGHLAND MILLS FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10930  C  Occupation SR DIR BUSINESS PLANNIN Aggregate Year-to-Date	Date of Receipt    M   M   D   D   2 0 0 7
Full Name (Last, First, Middle Initial) MS AMY STEINKELLNER  Mailing Address 1740 HIGHLAND DRI  City ELM GROVE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code WI 53122  C Occupation VP CLINICAL SVCS Aggregate Year-to-Date	Date of Receipt  M M M / D D N / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .	1	85.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS  Any information copied from such Benorts and	Use separate schedule(s) for each category of the Detailed Summary Page  d Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 111 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political committee to s	olicit contributions from such committee.
Full Name (Last, First, Middle Initial) DR GLEN STETTIN Mailing Address 8 MILL GLEN CT		Date of Receipt
City	State Zip Code	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42435
UPPER SADDLE RIVER	NJ 07458	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP/GM CLIN & THERAP SOL GROU	]P
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial)  MR GERARD STOCKER, JR  Mailing Address 80 ALGONQUIN TR	21	Date of Receipt
		12 08 2007
CALLAND	State Zip Code	Transaction ID: INC.A.42191
OAKLAND  FEC ID number of contributing federal political committee.	NJ 07436	Amount of Each Receipt this Period 15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initial) MS JANNA STOUL		Date of Receipt
Mailing Address 4 APACHE WAY		1 2 0 8 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42104
MONTVILLE	NJ 07045	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
SUBTOTAL of Receipts This Page (optional	)	232.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			on for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR SCOTT STRATTON			Date of Receipt
Mailing Address 351 TIMBERLANE DF		7: 0 1	12 08 2007
City ORANGE	State CT	Zip Code 06477	Transaction ID: INC.A.42479
FEC ID number of contributing federal political committee.	C	004//	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PRO	n DUCT DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MS PATRICIA STRETE  Mailing Address 19275 PAVER BARNI			Date of Receipt
Mailing Address 19273 PAVER BARINI	ES ROAD		12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42138
MARYSVILLE	OH	43040	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR CLIN	n NICAL THERAPEUTICS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MS COLEEN SULLIVAN			Date of Receipt
Mailing Address 38 BARKMILL TERRA	ACE		12 08 7 2007
City	State	Zip Code	Transaction ID: INC.A.42415
MONTVILLE	NJ	07045	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n BUSINESS REQUIREMENTS	3
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional) .			100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 310 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	l y not be sold or used by any persordress of any political committee to	
NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS CYNTHIA SULLIVAN			Date of Receipt
Mailing Address 21 DENISE DRIVE			12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42367
KINNELON	NJ	07405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FIN.	n ANCIAL PLANNING	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		2969.20	
Full Name (Last, First, Middle Initial) MR MARK SULLIVAN			Date of Receipt
Mailing Address 16025 PINE VALE	PL.		12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42095
MIDLOTHIAN	VA	23113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CS S	n SYSTEMS PLAN & IMPLEM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MS IRENE SUTTON			Date of Receipt
Mailing Address 20 AVENUE @ PO APPT 209	RT IMPERIAL		12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42159
WEST NEW YORK	NJ	07093	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n FECHNOLOGY	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1025.00	
SUBTOTAL of Receipts This Page (optional			257.30

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 310 (check only one)    X
or for commercia	al purposes, other than using the	tatements ma name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ \	OMMITTEE (In Full) EALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
MR TIMOTHY	ast, First, Middle Initial) 'SWETT  SS 8362 GOLDEN PRAIR	IE DDIVE		Date of Receipt
	555 8362 GULDEN PRAIR	IE DRIVE		12 08 2007
City		State	Zip Code	Transaction ID: INC.A.42200
<u>TAMPA</u>		<u>FL</u>	33647	Amount of Each Receipt this Period
FEC ID numb federal politic	per of contributing all committee.	C		50.00
	oloyer ALTH SOLUTIONS	Occupatio VP/GM	n	
Receipt For:	. Conoral	Aggregate	e Year-to-Date ▼	_
Primary Other (s	y		2600.00	
MR NICHOLA				Date of Receipt
Mailing Addre	ess 2710 WEXFORD RD			12 08 2007
City		State	Zip Code	Transaction ID: INC.A.42440
<u>UPPER AP</u>	RLINGTON	OH	43221	Amount of Each Receipt this Period
FEC ID numb federal politic	per of contributing all committee.	С		25.00
	oloyer ALTH SOLUTIONS	. '	NICAL SVCS	
Receipt For:	/ General	Aggregate	e Year-to-Date ▼	
	specify) ♥		650.00	
Full Name (La MS MELINDA	ast, First, Middle Initial) THIEL			Date of Receipt
Mailing Addre	ess 27 GARVEY ROAD			12 08 2007
City		State	Zip Code	Transaction ID: INC.A.42168
WAYNE		NJ	07470	Amount of Each Receipt this Period
FEC ID number federal politic	per of contributing all committee.	C		25.00
	oloyer ALTH SOLUTIONS	. '	PRODUCT MGMT	
Receipt For:	y General	Aggregate	e Year-to-Date ▼	-
	y General specify) ♥		650.00	
SUBTOTAL of	Receipts This Page (optional)			100.00
	eriod (last page this line number			

Receipt For:  Primary  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MS MELISSA THOMET  Mailing Address 721 HINMAN AVE  #1E  City  EVANSTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Aggregate  Aggregate  Aggregate  Aggregate  Aggregate  Occupation  Occupation  Occupation  DIR ACCO	ACTION COMMITTEE (a.k Zip Code 76016	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR LARRY THOMAS  Mailing Address 3915 SILKWOOD TRAIL  City State ARLINGTON TX  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS MANAG  Receipt For: Aggregate  Primary General Other (specify)   Full Name (Last, First, Middle Initial)  MS MELISSA THOMET  Mailing Address 721 HINMAN AVE #1E  City State  EVANSTON IL  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Occupation DIR ACCO  Receipt For: Aggregate  Primary General Other (specify)   Full Name (Last, First, Middle Initial)	Zip Code 76016  n NG PHARMACIST e Year-to-Date  Zip Code  Zip Code	Date of Receipt    M   M   D   D   2 0 0 7   Transaction ID: INC.A.42346   Amount of Each Receipt this Period   4.41    Date of Receipt   M   M   D   D   2 0 0 7   Transaction ID: INC.A.42101   Amount of Each Receipt this Period   Am
City ARLINGTON TX  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS MELISSA THOMET Mailing Address 721 HINMAN AVE #1E City State EVANSTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Occupation DIR ACC Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	76016  n NG PHARMACIST  Year-to-Date ▼  229.32  Zip Code	Transaction ID: INC.A.42346  Amount of Each Receipt this Period  4.41  Date of Receipt  M M M CONTROL OF TRANSACTION ID: INC.A.42101  Amount of Each Receipt this Period
ARLINGTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS MELISSA THOMET  Mailing Address 721 HINMAN AVE #1E  City State  EVANSTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Occupation MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	76016  n NG PHARMACIST  Year-to-Date ▼  229.32  Zip Code	Date of Receipt  Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42101  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)   Full Name (Last, First, Middle Initial) MS MELISSA THOMET Mailing Address 721 HINMAN AVE #1E  City State EVANSTON IL  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)   General Other (specify)   Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)	n NG PHARMACIST Year-to-Date ▼ 229.32	Date of Receipt  M M M C D D C Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary  Other (specify)  Full Name (Last, First, Middle Initial)  MS MELISSA THOMET  Mailing Address  721 HINMAN AVE  #1E  City  EVANSTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify)  Full Name (Last, First, Middle Initial)	NG PHARMACIST  e Year-to-Date  229.32  Zip Code	Transaction ID: INC.A.42101  Amount of Each Receipt this Period
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS MELISSA THOMET Mailing Address 721 HINMAN AVE #1E  City State EVANSTON IL  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	229.32 Zip Code	Transaction ID: INC.A.42101  Amount of Each Receipt this Period
MS MELISSA THOMET  Mailing Address 721 HINMAN AVE  #1E  City State  EVANSTON IL  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	•	Transaction ID: INC.A.42101  Amount of Each Receipt this Period
#1E  City State  EVANSTON IL  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial)	•	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42101  Amount of Each Receipt this Period
EVANSTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)	•	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial)	1 1 1 1 1	
Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial)		
Primary General Other (specify)  Full Name (Last, First, Middle Initial)	n CT MGMT	
	e Year-to-Date ▼ 305.00	
Me Watt Hierobi		Date of Receipt
Mailing Address 17326 ELLEN DR		12 08 2007
City State	Zip Code	Transaction ID: INC.A.42215
LIVONIA MI  FEC ID number of contributing federal political committee.	48152	Amount of Each Receipt this Period  75.00
Name of Employer MEDCO HEALTH SOLUTIONS SR NATI	n ACCT EXEC	
	e Year-to-Date ▼ 1950.00	
SUBTOTAL of Receipts This Page (optional)		104.41

Name of Employer MEDCO HEALTH SOLUTIONS	e and address of any political committee to s	solicit contributions from such committee.
MR TIMOTHY TIDD  Mailing Address 7974 FLAMETREE CT  City  LAS VEGAS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General	NV 89123  C Decupation /P/GM Aggregate Year-to-Date ▼	Transaction ID: INC.A.42271  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	C Decupation /P/GM Aggregate Year-to-Date ▼	
Receipt For: Primary General	/P/GM Aggregate Year-to-Date ▼	-
Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN Mailing Address 838 COLONIAL RD		Date of Receipt
City	State Zip Code	Transaction ID: INC.A.42105
FRANKLIN LAKES  FEC ID number of contributing federal political committee.	NJ 07417 C	Amount of Each Receipt this Period 50.00
MEDCO HEALTH SOLUTIONS	Occupation /P BENEFIT SYSTEMS SUPPORT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MRS DONNA TOPOLSKI		Date of Receipt
Mailing Address 128 MANHATTAN TERRA	CE	12 08 2007
City	State Zip Code	Transaction ID: INC.A.42402
DUMONT  FEC ID number of contributing federal political committee.	NJ 07628 C	Amount of Each Receipt this Period  25.00
MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUSINESS REQUIREMENTS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE   117/310   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN(	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR HECTOR TORRES			Date of Receipt
Mailing Address 6023 HOMESTEAD	COURT		12 08 2007
City HILLIARD	State OH	Zip Code 43026	Transaction ID: INC.A.42308  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		4.28
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SUPV IN	NENTORY CONTROL	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 222.56	
Full Name (Last, First, Middle Initial) MS CLAUDIA TUCKER			Date of Receipt
Mailing Address 713 INDIAN CREE	K RD		12 08 2007
City AMHERST	State VA	Zip Code 24521	Transaction ID: INC.A.42285  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	ETGLI	75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n GOVERNMENT AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 1950.00	
Full Name (Last, First, Middle Initial) MR GARY TULLY			Date of Receipt
Mailing Address 16 FIELDHEDGE D	RIVE		1 2 0 8 2 0 0 7
City HILLSBOROUGH	State NJ	Zip Code 08844	Transaction ID: INC.A.42421  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	000++	30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT SVC DELIVERY	
Receipt For:  Primary General  Other (specify) ▼	<del>'</del>	Year-to-Date ▼ 755.00	
SUBTOTAL of Receipts This Page (optional	1)		109.28

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
or for commercial purposes, other than	orts and Statements may not be sold or used by any per using the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTION	S INC. POLITICAL ACTION COMMITTEE (a.k	.a. Medco Health PAC)
Full Name (Last, First, Middle Initial MS CARA VAN ZILE		Date of Receipt
Mailing Address 31 LINCOLN F	RD	12 08 2007
City KINNELON	State Zip Code NJ 07405	Transaction ID: INC.A.42211
FEC ID number of contributing federal political committee.	NJ 07405	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DIR ANALYTICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial MRS MICHELLE VANCURA		Date of Receipt
Mailing Address W328 S4230 S	SPRING RIDGE	12 08 7 2007
City WAUKESHA	State Zip Code WI 53189	Transaction ID: INC.A.42513  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial MRS JEANNINE VANKLEECK		Date of Receipt
Mailing Address 56 ZIMMER A	VENUE	12 08 2007
City	State Zip Code	Transaction ID: INC.A.42121
MIDLAND PARK  FEC ID number of contributing federal political committee.	NJ 07432	Amount of Each Receipt this Period 25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINANCIAL APPLICATIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (c	ptional)	125.00

ITEMIZE	D RECEIPTS	otements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 310 (check only one)    X
or for comme	or copied from such Reports and Starcial purposes, other than using the recommittee (In Full)  HEALTH SOLUTIONS INC. PORTIONS INC.	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.  a. Medco Health PAC)
A. MR NICHO Mailing Ad City ROCKV FEC ID not federal po Name of EMEDCO I Receipt For Print		State NY  C  Occupation VP MKTI Aggregate		Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42276  Amount of Each Receipt this Period  50.00
B. MR WIL V Mailing Ac City UPPER FEC ID not federal pool Name of EMEDCO I Receipt For Print	SADDLE RIVER  umber of contributing litical committee.  Employer HEALTH SOLUTIONS or:	State NJ C Occupation SR DIR 6	Zip Code 07458  n E-COM STRAT & DELI e Year-to-Date ▼ 1040.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. MR JEFFF Mailing Ad City BLOOM FEC ID not federal po Name of EMEDCO I Receipt For Print	UNIT #17  FIELD  umber of contributing litical committee.  Employer HEALTH SOLUTIONS  or:	State NJ C Occupation SR DIR N	Zip Code 07003 n MEDICAL e Year-to-Date ▼	Date of Receipt    M
	of Receipts This Page (optional) s Period (last page this line number o		<u> </u>	115.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE   120 / 310   (check only one)
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR GORDON VICKERS			Date of Receipt
Mailing Address 436 MOUNTAIN A	VENUE		M M / D D / Y Y Y Y Y Y 1 1 2 0 8 2 0 0 7
City WESTFIELD	State NJ	Zip Code 07090	Transaction ID: INC.A.42074
FEC ID number of contributing federal political committee.	C	07090	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CCT EXEC	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR MUNISH VIJ			Date of Receipt
Mailing Address 11 BOULDER TRA	AIL		M M / D D / Y Y Y Y Y 1 1 2 0 8 2 0 0 7
City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC.A.42463
FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n CAL SPECIALIST	
Receipt For:  Primary General  Other (specify) ▼	- + ·	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR MICHAEL WAIBEL			Date of Receipt
Mailing Address N48 W16381 LON	IE OAK LN		M M / D D / Y Y Y Y Y 1 Y 1 2 0 8 2 0 0 7
City MENOMONEE FALLS	State WI	Zip Code 53051	Transaction ID: INC.A.42236
FEC ID number of contributing federal political committee.	C	33031	Amount of Each Receipt this Period  15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	ACCT MGMT	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 390.00	
SUBTOTAL of Receipts This Page (option	al)		65.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR DANIEL WALDEN Mailing Address 450 BEECHMONT DI  City NEW ROCHELLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10804  C  Occupation SVP REGULATORY & MC PROGRA Aggregate Year-to-Date   5000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS THERESE WALKER Mailing Address 363 MULBERRY CT  City WYCKOFF  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07481  C  Occupation SR DIR PRODUCT MGMT Aggregate Year-to-Date  650.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 0 7  Transaction ID: INC.A.42090  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE Mailing Address 5445 GOODWIN AVE  City DALLAS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code TX 75206  C  Occupation VP SALES SEGMENT LEADER Aggregate Year-to-Date   5000.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.42465  Amount of Each Receipt this Period  192.31
SUBTOTAL of Receipts This Page (optional)		409.62

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122/310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.
<b>∠</b> <b>\</b> .	Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE Mailing Address 5 APPLE ORCHARD F  City	RD State	Zip Code	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42290
	MOORESTOWN FEC ID number of contributing federal political committee.	NJ	08057	Amount of Each Receipt this Period 50.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	Occupation VP/GM Aggregate	e Year-to-Date ▼ 912.50	
- 3.	Full Name (Last, First, Middle Initial) MS CATHERINE WASSON Mailing Address 26072 HARBOR VIEW	1		Date of Receipt  1 2 0 8 2 0 0 7
	City	State	Zip Code	Transaction ID: INC.A.42108
	CAPISTRANO BEACH  FEC ID number of contributing federal political committee.	CA	92624	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n _ ACCTS	
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼	
	Full Name (Last, First, Middle Initial) MS BEVERLY WATSON Mailing Address 2 MICHELANGELO COURT			Date of Receipt
	City	State	Zip Code	1 2 0 8 2 0 0 7 Transaction ID: INC.A.42335
	SOMERSET	NJ	08873	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BEN	n IEFIT DELIVERY SYSTEMS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional)	1		125.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 123 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to NC. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS DONNA WEATHERS  Mailing Address 1043 BELL STRE  City  EDMONDS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code WA 98020  C  Occupation NATL ACCT EXEC  Aggregate Year-to-Date  260.00	Date of Receipt  M M M / D D M / Y Y Y Y Y  Transaction ID: INC.A.42266  Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) MRS KELLY WEBBER Mailing Address 107 UPPER SADI  City MONTVALE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	OLE RIVER ROAD  State Zip Code NJ 07645  C  Occupation VP CORP HR	Date of Receipt  M M M / D D N / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR TIMOTHY WENTWORTH  Mailing Address 309 WATERVIEW	Aggregate Year-to-Date ▼ 2125.00	Date of Receipt  1 2 0 8 2 0 0 7
City FRANKLIN LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	State Zip Code NJ 07417  C  Occupation PRES, CEO ACCREDO  Aggregate Year-to-Date   5000.00	Transaction ID: INC.A.42178  Amount of Each Receipt this Period  192.31
SUBTOTAL of Receipts This Page (option	nal)	302.31

SCHEDULE A (FEC F ITEMIZED RECEIPTS	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 124 / 310   (check only one)
or for commercial purposes, other	than using the name and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In FI MEDCO HEALTH SOLUT	,	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle I MR KENNETH WERMES	,		Date of Receipt
Mailing Address 26037 N V	/RANGLER RD		12 08 2007
City	State	Zip Code	Transaction ID: INC.A.42263
SCOTTSDALE  FEC ID number of contributing federal political committee.	AZ C	85255	Amount of Each Receipt this Period 75.00
Name of Employer MEDCO HEALTH SOLUTION	S Occupation VP/GM		
Receipt For:  Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1950.00	
Full Name (Last, First, Middle I MR PETER WHITE	nitial)		Date of Receipt
#17F	NCHOT AVE.		12 08 2007
City PHOENIX	State AZ	Zip Code 85016	Transaction ID: INC.A.42096  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1	25.00
Name of Employer MEDCO HEALTH SOLUTION	S Occupation DIR ACC		
Receipt For:  Primary Genera  Other (specify) ▼		Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle I MS BEVERLY WINKLER	nitial)		Date of Receipt
Mailing Address 17 LYNW	OOD RD		12 08 YYYYY 12007
City VERONA	State NJ	Zip Code 07044	Transaction ID: INC.A.42364  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07044	25.00
Name of Employer MEDCO HEALTH SOLUTION	S Occupation SR DIR C		
Receipt For:  Primary General Other (specify) ▼	55 5	Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Pa	re (entional)		125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 125 / 310 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and addre	ss of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEPHEN WOGEN Mailing Address 145 WAUGHAW ROA  City TOWACO FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ C Occupation VP MEDICA	Zip Code 07082 ARE FINANCE ear-to-Date ▼	Date of Receipt  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42193  Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MRS ELISSA WOJTOWICZ, RPH Mailing Address 325 BOUND BROOK A  City PISCATAWAY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ  C  Occupation DIR RRA	Zip Code 08854 ear-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS ANNA WONG  Mailing Address 64-20 BELL BLVD  City BAYSIDE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)		Zip Code 11364 ED SOLUTIONS ear-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			130.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 126 / 310 (check only one)    X	
7	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.	
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)	
۸.	Full Name (Last, First, Middle Initial) MS CYNTHIA WOOD			Date of Receipt	
	Mailing Address 4002 FALCON LAKE	12 08 2007			
	City	State	Zip Code	Transaction ID: INC.A.42349	
	ARLINGTON	TX	76016	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		5.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRO	n DFESSIONAL PRACTICES		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼		215.00		
_	Full Name (Last, First, Middle Initial) MS JUDITH WOOD			Date of Receipt	
	Mailing Address 76 COLONIAL ROAD	)		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State	Zip Code	Transaction ID: INC.A.42409	
	STILLWATER 550 ID. of the state	NY	12170	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n ACCT MGMT		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼		
	Other (specify)		650.00		
_	Full Name (Last, First, Middle Initial) MR SERGEY YANITSKIY			Date of Receipt	
	Mailing Address 793 LINCOLN AVE			12 08 2007	
	City	State	Zip Code	Transaction ID: INC.A.42151	
	POMPTON LAKES	NJ	07442	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		25.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio TECHNI	n CAL SPECIALIST		
	Receipt For:	Aggregate	e Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	650.00		
г					

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person he name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS SARAH YINGLING Mailing Address 901 ST MARKS AVE  City WESTFIELD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code NJ 07090  C  Occupation SR DIR PRODUCT MGMT  Aggregate Year-to-Date   650.00	Date of Receipt  M M / D D / Y Y Y Y Y  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42252  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR DANIEL ZELEM, JR Mailing Address 219 SPOOK ROCK I  City SUFFERN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	RD.  State Zip Code NY 10901  C  Occupation	Date of Receipt  M M / D D / Y Y Y Y Y  1 2 0 8 2 0 0 7  Transaction ID: INC.A.42323  Amount of Each Receipt this Period  50.00
Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MS JILL ZELMAN	VP E-COM DEV  Aggregate Year-to-Date ▼  1300.00	Date of Receipt
Mailing Address 43604 EMERALD DU  City  LEESBURG  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code VA 20176  C  Occupation DIR CONSOLIDATION PLAN & RPR	Transaction ID: INC.A.42379  Amount of Each Receipt this Period  25.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional)	<b></b>	100.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 128/310 (check only one)    X
A	ny information copied from such Reports and St r for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR ANTHONY ZOLFO			Date of Receipt
	Mailing Address 726 HIGH MOUNTAIN  City	ROAD	Zip Code	1 2 0 8 2 0 0 7  Transaction ID: INC.A.42470
	FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio ASST CO		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 650.00	
— В.	Full Name (Last, First, Middle Initial) DANIELE RUSKIN, ESQ.			Date of Receipt
	Mailing Address 865 WEST END AVE.,	12 11 2007		
	City	State	Zip Code	Transaction ID: INC.A.41949
	NEW YORK	NY	10025	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1350.00
	Name of Employer MEDCO HEALTH SOLUTIONS, INC.	Occupatio VICE PR	n RESIDENT AND COUNSEL,	GOVERNMENT
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1350.00	
 С.	Full Name (Last, First, Middle Initial) JEAN K. BERGWALL			Date of Receipt
	Mailing Address 1640 CENTURY CENT	ER PKWY.		12 14 2007
	City MEMPHIS	State TN	Zip Code	Transaction ID: INC.A.41995
	FEC ID number of contributing federal political committee.	C	38134	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIR PRO	n DDUCT LINE II	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			1400.00
	TOTAL This Period (last page this line number of		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>^)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 129/310   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) CALVIN BINGHAM			Date of Receipt
Mailing Address 1640 CENTURY CE	NTER PKWY.		M M / D D / Y Y Y Y Y Y 1 1 2 1 4 2 0 0 7
City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.41996  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation GENERA	n AL MANAGER	
Receipt For:  Primary  General  Other (specify)		Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) KEN BODMER			Date of Receipt
Mailing Address P.O. BOX 381947			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GERMANTOWN	State TN	Zip Code 38183	Transaction ID: INC.A.41997  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00100	200.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FIN	n ANCE AND CLIENT SALES	
Receipt For:  Primary General  Other (specify) ▼	<del>-   '</del>	Year-to-Date ▼ 3600.00	
Full Name (Last, First, Middle Initial) RUSS M. BOURNE			Date of Receipt
Mailing Address 1640 CENTURY CE	NTER PKWY.		M M / D D / Y Y Y Y Y Y Y 1 Y 1 2 0 0 7
City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.41998  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation VP SALE		7
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optional	)		275.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and some for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	o solicit contributions from such committee.
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) STEVEN BROWN Mailing Address 1620 CENTURY CEN		VAY	Date of Receipt  1 2 1 4 2 0 0 7
	City	State	Zip Code	Transaction ID: INC.A.42000
	MEMPHIS  FEC ID number of contributing federal political committee.	C	38134	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For:  Primary  General  Other (specify) ▼	++	on OR - PRODUCT LINE e Year-to-Date ▼ 325.00	
В.	Full Name (Last, First, Middle Initial) AMANDA J. BUNDY Mailing Address 1640 CENTURY CEN	Date of Receipt  1 2 1 4 2 0 0 7		
	City	State	Zip Code	Transaction ID: INC.A.42001
	MEMPHIS	TN	38134	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For: Primary General Other (specify)	<del>, '</del>	on MBURSEMENT e Year-to-Date ▼	1
_ C.	Full Name (Last, First, Middle Initial) BRIAN A. BURFORD			Date of Receipt
	Mailing Address 1640 CENTURY CEN	TER PRWY.		12 14 2007
	City	State	Zip Code	Transaction ID: INC.A.42002
	MEMPHIS  FEC ID number of contributing federal political committee.	TN	38134	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIR BUS	on SINESS DEVELOPMENT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional) .			100.00
Γ.	TOTAL This Period (last page this line number	r only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16
Ar	y information copied from such Reports and s for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
	Full Name (Last, First, Middle Initial) JOSEPH A. CASACCIA, JR.  Mailing Address 1640 CENTURY CEN	TED DKWV		Date of Receipt
		ILITI KWI.		12 14 2007
	City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42003  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIR SPE	n CIALITY OPS CUST SERVI	─ <del> </del> C <b>E</b>
	Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	Full Name (Last, First, Middle Initial) NICHOLAS CLIFTON			Date of Receipt
	Mailing Address 1640 CENTURY CEN	12 14 2007		
	City	State	Zip Code	Transaction ID: INC.A.42004
	MEMPHIS TN		38134	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation AVP SAL		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
	Full Name (Last, First, Middle Initial) JEFFREY A. COOLE			Date of Receipt
	Mailing Address 1640 CENTURY CEN	TER PKWY.		12 14 2007
	City	State	Zip Code	Transaction ID: INC.A.42005
	MEMPHIS  FEO. ID contribution	TN	38134	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	<del>-                                    </del>	& REGULATORY REPORTI	NG
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
$\overline{}$		-1		100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	solicit contributions from such committee.
∠ <b>.</b> .	Full Name (Last, First, Middle Initial) WARREN J. DAVIS Mailing Address 1640 CENTURY CENT	TER PKWY.		Date of Receipt  1 2 1 4 2 0 0 7
	City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42006
	FEC ID number of contributing federal political committee.	C	38134	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For:  Primary General Other (specify) ▼	Occupation DIR FINA Aggregate		
- 3.	Full Name (Last, First, Middle Initial) MICHELLE R. DERRYBERRY Mailing Address 1640 CENTURY CENT	I TER PKWY.		Date of Receipt  1 2 1 4 2 0 0 7
	City	Zip Code	Transaction ID: INC.A.42007	
	MEMPHIS	TN	38134	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIR REII	n MBURSEMENT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) ANDREW DOEDYNS Mailing Address 1640 CENTURY CENTER PKWY.			Date of Receipt
	City	State	Zip Code	1 2 1 4 2 0 0 7  Transaction ID: INC.A.42008
	MEMPHIS	TN	38134	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIR CLIN	n NICAL OPERATIONS	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 275.00	
	SUBTOTAL of Receipts This Page (optional)			75.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) SUMIT DUTTA  Mailing Address 534 HUDSON ST. #3  City NEW YORK  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO NOVA FACTOR  Receipt For: Primary General Other (specify)	State Zip Code NY 10014  C  Occupation PRESIDENT  Aggregate Year-to-Date  308.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) REBECCA R. DYER Mailing Address 1640 CENTURY CENTURY City MEMPHIS FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For: Primary Other (specify)	NTER PKWY.  State Zip Code TN 38134  C  Occupation DIR PROJECT MANAGEMENT  Aggregate Year-to-Date ▼  275.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) RICHARD FARIS Mailing Address 2020 HEATHER CO  City MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For: Primary General Other (specify)   Other (specify)	State Zip Code TN 38119  C  Occupation VP - HEALTH OUTCOME SOLUTION Aggregate Year-to-Date  550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		152.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 134 / 310 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) CHAD FOREMAN  Mailing Address 1640 CENTURY CENT  City MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For: Primary General Other (specify)	State TN C Occupation DIR FINA		Date of Receipt    M M
Full Name (Last, First, Middle Initial) KEVIN FRANCO  Mailing Address 648 RIVERSIDE DR #222  City  MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State TN  C  Occupation VP FINA  Aggregate	Zip Code 38103	Date of Receipt  M M J J J J J J Z D D J Z D D D D D D D D D
Full Name (Last, First, Middle Initial) ROBERT FURTH  Mailing Address 1640 CENTURY CENT  City MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For: Primary General Other (specify)	State TN C Occupation GENERA	Zip Code 38134  n AL MANAGER Year-to-Date  275.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 135 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of the name and addr	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) SHARON D. HARRIS Mailing Address 186 N. WHITE STA	ATION PD	Date of Receipt
City MEMPHIS	State Zip Code TN 38117	Transaction ID: INC.A.42015  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation DIRECTOR - HR  Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial) DAN HAYES Mailing Address 4679 AYRON TER	RACE	Date of Receipt  1 2 1 4 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42016
PALM HARBOR	FL 34685	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation VP - OPERATIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) ELIZABETH A. HOLLOWAY		Date of Receipt
Mailing Address 1640 CENTURY C	ENTER PKWY.	12 / 14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MEMPHIS	State Zip Code TN 38134	Transaction ID: INC.A.42017  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 38134	25.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation SR LEGAL COUNSEL	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (option	al)	100.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	fo	se separate schedule(s) r each category of the etailed Summary Page	FOR LINE NUMBER: PAGE 136 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not I he name and address	pe sold or used by any perso of any political committee to	on for the purpose of soliciting contributions
MEDCO HEALTH SOLUTIONS INC	. POLITICAL ACTI	ON COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) LYNN HOSTMYER			Date of Receipt
Mailing Address 1640 CENTURY CE			12 14 2007
City		Zip Code	Transaction ID: INC.A.42018
MEMPHIS  FEC ID number of contributing federal political committee.	C	38134	Amount of Each Receipt this Period 25.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation	ANAGER	_
Receipt For:	GENERAL M		$\dashv$
Primary General Other (specify) ▼	Aggregate Year	-to-Date ▼ 300.00	]
Full Name (Last, First, Middle Initial) RICHARD KLUSOVSKY			Date of Receipt
Mailing Address 1016 FAIRWOOD L	ANE		12 14 YYYY 12007
City	State	Zip Code	Transaction ID: INC.A.42019
ACWORTH	GA	30101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIRCTOR - N	MANAGED CARE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year	-to-Date ▼ 350.00	]
Full Name (Last, First, Middle Initial) JAMES P. LANGLEY			Date of Receipt
Mailing Address 1640 CENTURY CE			12 14 2007
City		Zip Code	Transaction ID: INC.A.42020
MEMPHIS	TN	38134	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation VP REIMBUF	RSEMENT	
Receipt For:	Aggregate Year	r-to-Date ▼	_
Primary General Other (specify) ▼		600.00	]

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 137 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	he name and addr	ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) PATRICIA LETCHWORTH  Mailing Address 1640 CENTURY CE  City MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP, INC.	State TN C	Zip Code 38134 BURSEMENT	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: INC.A.42021  Amount of Each Receipt this Period  25.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) SHELLY I. MARTIN  Mailing Address 1640 CENTURY CE	NTER PKWY.		Date of Receipt    M
City	State	Zip Code	Transaction ID: INC.A.42022
MEMPHIS	TN	38134	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIR HUM	AN RESOURCES	
Receipt For:  Primary General  Other (specify) ▼	<del>-                                     </del>	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) THOMAS O. MARTIN Mailing Address 1640 CENTURY CE	NTER PKWY.		Date of Receipt
City	State	Zip Code	Transaction ID: INC.A.42023
MEMPHIS	TN	38134	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP, INC.	<del>-   '</del>	STRAT BUS DEVELOPME	T
Receipt For:  Primary General  Other (specify) ▼	Aggregate `	Year-to-Date ▼ 600.00	
			100.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 138 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
\ \.	Full Name (Last, First, Middle Initial) THOMAS S. MCCANN		` 	Date of Receipt
	Mailing Address 1640 CENTURY CENT  City	State	Zip Code	1 2 1 4 2 0 0 7  Transaction ID: INC.A.42024
	MEMPHIS FEC ID number of contributing	TN	38134	Amount of Each Receipt this Period
	federal political committee.	C		50.00
	Name of Employer ACCREDO HEALTH GROUP, INC. Receipt For:	Occupatio VP SALE		
	Primary General Other (specify) ▼	Aggregate	550.00	
	Full Name (Last, First, Middle Initial) DANETTE MEREDITH Mailing Address 1640 CENTURY CENT	ER PKWY.		Date of Receipt
	City	State	Zip Code	1 2 1 4 2 0 0 7  Transaction ID: INC.A.42025
	MEMPHIS	TN	38134	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupatio GENERA	n AL MANAGER - MULTI BRAI	N¢H
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	
_	Full Name (Last, First, Middle Initial) SUZANNE RICHARDS			Date of Receipt
	Mailing Address 21357 WEST 115TH T	ERRACE		12 14 2007
	City ORATHE	State KS	Zip Code 66061	Transaction ID: INC.A.42026  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupatio SR MGR	n R - BUSINESS DEVELOPME	NT NT
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 350.00	
	SUBTOTAL of Receipts This Page (optional)			100.00
	TOTAL This Period (last page this line number)	only)	•	

SCHEDULE A (FECTIVE ITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 139 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
or for commercial purposes, other  NAME OF COMMITTEE (In	er than using the name and ac Full)	ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
		ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle BARRY SOUTHERN			Date of Receipt
	NTURY CENTER PKWY		12 14 2007
City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42027  Amount of Each Receipt this Period
FEC ID number of contributir federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROU	P, INC. Occupation	on AL MANAGER	
Receipt For:  Primary Gene  Other (specify) ▼		e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle PETER A. STARK			Date of Receipt
Mailing Address 1670 CE	NTURY CENTER PARKI	NAY	12 14 2007
City MEMPHIS	State TN	Zip Code	Transaction ID: INC.A.42028
FEC ID number of contributir federal political committee.		38134	Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROU	P, INC. Occupation GROUP	on VICE-PRESIDENT - CORP	ORATE FINAN
Receipt For:  Primary Gene  Other (specify) ▼		e Year-to-Date   650.00	
Full Name (Last, First, Middle CHANTAL D. VEEVAETE Mailing Address 7292 OA	,		Date of Receipt  1 2 1 4 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42029
GERMANTOWN FEC ID number of contributir federal political committee.	TN C	38138	Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROU	P, INC. Occupation VICE PR	on RESIDENT, HUMAN RESOU	
Receipt For: Primary Gene Other (specify)	55 5	e Year-to-Date ▼ 600.00	
	age (optional)		125.00

SCHEDULE A (FEC Form : ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 140 / 310 (check only one)    X
or for commercial purposes, other than us  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any personing the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	NC. POLITICAL ACTION COMMITTEE (a.k.a	, 
Mailing Address 1717 DYMOKE [	DRIVE	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City COLLIERVILLE	State Zip Code TN 38017	Transaction ID: INC.A.42030  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation AVP QA AND PRODUCT INTEGRAT	ΓΙΦΝ
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial) BRENDA WRIGHT  Mailing Address 1640 CENTURY	CENTER PKWY	Date of Receipt
		12 14 2007
City MEMPHIS	State Zip Code TN 38134	Transaction ID: INC.A.42031  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 30134	50.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation VP QUALITY INTEGRITY HEALTH	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) MS MARIA ANDERSON Mailing Address 4605 W SUNSE	T BLVD	Date of Receipt
City	State Zip Code	1 2 1 5 2 0 0 7 Transaction ID: INC.A.42799
TAMPA	FL 33629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CUST SVC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  260.00	
SURTOTAL of Possints This Page (entire	onal)	80.00

City State Zip Code HENDERSON NV 89074  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:    Other (specify) ▼	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 310 (check only one)    X
A MRI DAVID BAUGH  Mailing Address 1813 ADONIS AVE  City State Zip Code NV 89074  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼	or for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	ame and add	dress of any political committee to	solicit contributions from such committee.
HENDERSON  NV 89074  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:    Primary	MR DAVID BAUGH			M M / D D / Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:    Primary   General Other (specify) ▼	HENDERSON FEC ID number of contributing	NV		Transaction ID: INC.A.42889  Amount of Each Receipt this Period  23.00
Mailing Address 26 DAYLILY DRIVE  City State Zip Code NJ 08054  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Full Name (Last, First, Middle Initial)  MR BARRY BOUDREAUX  Mailing Address 3380 SADDLEBROOK STREET  City State Zip Code NJ 08054  Transaction ID: INC. A. 42941  Amount of Each Receipt this Period NJ 12 15 15 20  Transaction ID: INC. A. 42941  Amount of Each Receipt this Period NJ 12 15 15 20  Total Name (Last, First, Middle Initial)  MR BARRY BOUDREAUX  Mailing Address 3380 SADDLEBROOK STREET  City State Zip Code NV 89141  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  DIR PHARM PRACTICE  Receipt For: Aggregate Year-to-Date ▼	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	Occupation MGR BE	NEFIT DELIVERY SYSTEMS e Year-to-Date ▼	6
City State Zip Code NJ 08054  MOUNT LAUREL NJ 08054  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Full Name (Last, First, Middle Initial)  MR BARRY BOUDREAUX  Mailing Address 3380 SADDLEBROOK STREET  City State Zip Code LAS VEGAS  NV 89141  FEC ID number of contributing federal political committee.  Name of Employer Middle Initial)  City State Zip Code Transaction ID: INC.A.42528  Amount of Each Receipt this Period To State S	MS CHRISTINE BIZARRO			M M / D D / Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS    Name of Employer MEDCO HEALTH SOLUTIONS   DIR HR	•		·	
Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX Mailing Address 3380 SADDLEBROOK STREET  City State Zip Code LAS VEGAS NV 89141  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Aggregate Year-to-Date ▼  Date of Receipt  M M M / D D D / Y Y Y Y		C		15.00
Mailing Address 3380 SADDLEBROOK STREET  City State Zip Code LAS VEGAS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Date of Receipt  Transaction ID: INC.A.42528  Amount of Each Receipt this Period.  C  21  Aggregate Year-to-Date ▼	Receipt For: Primary General	DIR HR	e Year-to-Date ▼	
City State Zip Code LAS VEGAS  NV 89141  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  State Zip Code Transaction ID: INC.A.42528  Amount of Each Receipt this Period  29  Cocupation DIR PHARM PRACTICE  Aggregate Year-to-Date ▼	MR BARRY BOUDREAUX			Date of Receipt
LAS VEGAS  NV 89141  Amount of Each Receipt this Period September 1200 000  Amount of Each Receipt this Period September 1200 000  Amount of Each Receipt this Period September 1200 000  Amount of Each Receipt this Period September 1200 000  Discreption Discreption Discreption September 1200 000  Amount of Each Receipt this Period Septembe	Mailing Address 3380 SADDLEBROOK S	TREET		
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  DIR PHARM PRACTICE  Receipt For:  Primary General  Aggregate Year-to-Date ▼	-		·	
MEDCO HEALTH SOLUTIONS  DIR PHARM PRACTICE  Receipt For:  Primary  General  1200.00	FEC ID number of contributing		09141	25.00
Primary General		DIR PHA	RM PRACTICE	
	Primary General	Aggregate		
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)		·····	63.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 142/310 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal he name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JASON COLE Mailing Address 14917 E BELLA VIS  City VERADALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code WA 99037  C  Occupation DIR PHARM PRACTICE  Aggregate Year-to-Date  400.00	Date of Receipt  1 2 1 5 2 0 0 7  Transaction ID: INC.A.42694  Amount of Each Receipt this Period  10.00
Full Name (Last, First, Middle Initial)  MR KENNETH DANIELS  Mailing Address 2903 CHUKKAR CO  City  PLANT CITY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	URT  State Zip Code FL 33567  C  Occupation VP/GM  Aggregate Year-to-Date ▼  1300.00	Date of Receipt  1 2 1 5 2 0 0 7  Transaction ID: INC.A.42758  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR WILLIS DINGLE  Mailing Address 17826 ARBOR GRE  City TAMPA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code FL 33647  C  Occupation SR DIR HR  Aggregate Year-to-Date   1300.00	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional)		60.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS GEORGIA EDDLEMAN Mailing Address 908 EDGEMEER LAI  City SOUTHLAKE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	NE  State Zip Code TX 76092  C  Occupation VP/GM  Aggregate Year-to-Date ▼  1791.40	Date of Receipt  1 2 1 5 2 0 0 7  Transaction ID: INC.A.42871  Amount of Each Receipt this Period  34.45
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO  Mailing Address 9 GREEN HILL TRAI  City TROPHY CLUB  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	L  State Zip Code TX 76262  C  Occupation VP/GM  Aggregate Year-to-Date ▼  2600.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR ROBERT GIBBS Mailing Address 544 DENMOOR COL  City GALLOWAY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code OH 43119  C  Occupation DIR PHARM PRACTICE  Aggregate Year-to-Date   650.00	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional)		96.95

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each category of the Detailed Summary Pa	he X 11a 11b 11c 12 age 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and address of any political com	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.    (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR J. HOLLINGER Mailing Address 784 CAPE HENRY E  City COLUMBUS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code OH 43228  C Occupation DIR BUSINESS PLANNING	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 216	5.84
MR RICHARD JONES  Mailing Address 12 WADE HAMPTOI  City HENDERSON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	N TRAIL  State Zip Code  NV 89052  C  Occupation  VP/GM  Aggregate Year-to-Date ▼  863	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 0 7  Transaction ID: INC.A.42822  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR ROSS LUCE Mailing Address 1066 WEST GROVE City GIBSONIA	State Zip Code PA 15044	Date of Receipt    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	15.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
SUBTOTAL of Receipts This Page (optional)		44.17

SCHEDULE A ( ITEMIZED REC	EIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 310 (check only one)    X
or for commercial purpo	ses, other than using the name and TEE (In Full)	may not be sold or used by any personal address of any political committee to the ACTION COMMITTEE (a.k.a.)	on for the purpose of soliciting contributions o solicit contributions from such committee.  a. Medco Health PAC)
Full Name (Last, First MR GILBERT RAINES Mailing Address 8  City  KELLER  FEC ID number of c federal political commod Mame of Employer MEDCO HEALTH S  Receipt For:  Primary  Other (specify)	State TX  Ontributing nittee.  C  Occupa DIR H  Aggreg  General		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First MRS MONICA REED Mailing Address 8  City TAMPA  FEC ID number of c federal political community MEDCO HEALTH S  Receipt For:  Primary  Other (specify)	State FL Ontributing nittee.  OLUTIONS  General  OCCUPA DIR P	Zip Code 33647	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First MR FRANK SCHULT Mailing Address 2  City  LAS VEGAS  FEC ID number of c federal political community of Employer MEDCO HEALTH SERVED FOR:  Primary  Other (specify)	State NV Ontributing nittee.  OCCUPA REGIO Aggreg	Zip Code 89117  ation  DNAL VP PHARMACIES pate Year-to-Date  1300.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
-	s This Page (optional)st page this line number only)	•	75.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 310 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and add	lress of any political committee to	o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC  Full Name (Last, First, Middle Initial)	C. POLITICAL A	CHON COMMITTEE (a.k.a	,
MR THOMAS SHANAHAN, III  Mailing Address 266 BRUSHY CREE	EK AVE		Date of Receipt  1 2 1 5 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42724
LAS VEGAS	NV	89148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		45.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
Receipt For: Primary General	Aggregate	Year-to-Date ▼ 2065.45	1
Other (specify)	0 0	2000.40	
Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE			Date of Receipt
Mailing Address 21625 E. MERIWET	HER LANE		1 2 1 5 7 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42752
LIBERTY LAKE	WA	99019	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 737.50	
Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT			Date of Receipt
Mailing Address 8362 GOLDEN PRA	AIRIE DRIVE		12 15 2007
City	State	Zip Code	Transaction ID: INC.A.42645
TAMPA	FL	33647	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		2600.00	
SUBTOTAL of Receipts This Page (optional			120.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147/310 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
(	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	o solicit contributions from such committee.
<u>∠</u> <b>A</b> .	Full Name (Last, First, Middle Initial) MR LARRY THOMAS Mailing Address 3915 SILKWOOD TRA  City ARLINGTON FEC ID number of contributing	State TX	Zip Code 76016	Date of Receipt  1 2 1 5 2 0 0 7  Transaction ID: INC.A.42792  Amount of Each Receipt this Period  4.41
	Receipt For:  Primary  Other (specify)	Occupation MANAG	on ING PHARMACIST e Year-to-Date ▼ 229.32	]
В.	Full Name (Last, First, Middle Initial) MR TIMOTHY TIDD Mailing Address 7974 FLAMETREE CT			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City  LAS VEGAS  FEC ID number of contributing federal political committee.	State NV	Zip Code 89123	Transaction ID: INC.A.42717  Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation VP/GM Aggregate	e Year-to-Date ▼ 1062.50	
– C.	Full Name (Last, First, Middle Initial) MR HECTOR TORRES Mailing Address 6023 HOMESTEAD CO	DURT		Date of Receipt  1 2 1 5 2 0 0 7
	City HILLIARD	State OH	Zip Code 43026	Transaction ID: INC.A.42754  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	45020	4.28
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SUPV IN	on NVENTORY CONTROL	
	Receipt For:  Primary  General  Other (specify)		e Year-to-Date ▼  222.56	
	SUBTOTAL of Receipts This Page (optional)		)	33.69
	TOTAL This Period (last page this line number	only)	_	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE Mailing Address 5 APPLE ORCHARD  City MOORESTOWN	State NJ	Zip Code 08057	Date of Receipt  1 2 1 5 2 0 0 7  Transaction ID: INC.A.42736  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP/GM Aggregate	n e Year-to-Date ▼ 912.50	50.00
Full Name (Last, First, Middle Initial) KIRK COTHAM  Mailing Address 2174 KNOLL LN.  City GERMANTOWN  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For: Primary General Other (specify)		Zip Code 38138  n RESIDENT, MARKETING AN e Year-to-Date	Date of Receipt    M M M
Full Name (Last, First, Middle Initial)  MS LESLIE ACHTER  Mailing Address 821 ALBEMARLE ST  City  WYCKOFF  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State NJ C Occupation EXEC DI	Zip Code 07481  n IR ANALYTICAL SVCS e Year-to-Date  650.00	Date of Receipt    M   M   2 2   2 0 0 7    Transaction ID: INC.A.42620    Amount of Each Receipt this Period   25.00
SUBTOTAL of Receipts This Page (optional)		• • • • • • • • • • • • • • • • • • •	1375.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 310 (check only one)    X
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) MR EDWARD ADAMCIK Mailing Address 1021 SUNSET RIDGE City BRIDGEWATER	State NJ	Zip Code 08807	Date of Receipt  1 2 2 2 2 2 0 0 7  Transaction ID: INC.A.42548  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del>- '</del>	n RM CONTRACT & CONSUL e Year-to-Date ▼ 1300.00	TING
В.	Full Name (Last, First, Middle Initial) DIANE ADAMS Mailing Address 34 THOMAS ST.			Date of Receipt  1 2 2 2 2 0 0 7
	City CALDWELL	State NJ	Zip Code 07006	Transaction ID: INC.A.42935  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	<del>, '</del>	BUSINESS REQUIREMENTS	8
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 325.00	
С. С.	Full Name (Last, First, Middle Initial) MR STEPHEN ADLER			Date of Receipt
	Mailing Address 139 BELLVALE LAKE			12 22 2007
	City WARWICK	State NY	Zip Code 10990	Transaction ID: INC.A.42619  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP INFO	n ) TECHNOLOGY	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1300.00	
	SUBTOTAL of Receipts This Page (optional) .			125.00
Ī	TOTAL This Period (last page this line numbe	r only)	<b>)</b>	

SCHEDULE A (FEC For ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 150 / 310   (check only one)
or for commercial purposes, other that	ports and Statements may not be sold or used by any per an using the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIO	NS INC. POLITICAL ACTION COMMITTEE (a.k	.a. Medco Health PAC)
Full Name (Last, First, Middle Initi MR JEFFREY ALEXANDER	<u></u>	Date of Receipt
Mailing Address 4 DEERPON	DCT	$\begin{array}{cccccccccccccccccccccccccccccccccccc$
City	State Zip Code	Transaction ID: INC.A.42638
FLEMINGTON	NJ 08822	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E-COM STRAT & DELI	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
Full Name (Last, First, Middle Initi DR JODY ALLEN	al)	Date of Receipt
Mailing Address 3031 MOUN		12 22 2007
City	State Zip Code	Transaction ID: INC.A.42618
MIDLOTHIAN	VA 23113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINICAL SVCS	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	1300.00	
Full Name (Last, First, Middle Initi MARENE ALLISON	al)	Date of Receipt
Mailing Address 4405 WISME	ER ROAD	12 22 YYYY 12007
City	State Zip Code	Transaction ID: INC.A.42930
DOYLESTOWN	PA 18901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SECURITY & ASSET PROTECT	TION
Receipt For:  Primary General	Aggregate Year-to-Date ▼	_
Other (specify)	1300.00	
	1	115.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 151 / 310 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JAMES ALLOCCO Mailing Address 19 ROSS ROAD	Olule	7.0.4	Date of Receipt  1 2 2 2 2 2 0 0 7
City SCARSDALE FEC ID number of contributing federal political committee.	State NY	Zip Code 10583	Transaction ID: INC.A.42685  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del></del>	TECHNOLOGY  Year-to-Date ▼  1300.00	
Full Name (Last, First, Middle Initial) TEJWANSH ANAND Mailing Address 10 WHIPPOORWIL	LL LAKE ROAD	)	Date of Receipt  1 2 2 2 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42900
CHAPPAQUA  FEC ID number of contributing federal political committee.	C	10514	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS		TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	]
Full Name (Last, First, Middle Initial) MS MARIA ANDERSON			Date of Receipt
Mailing Address 4605 W SUNSET E	BLVD 		12 22 2007
City TAMPA	State FL	Zip Code 33629	Transaction ID: INC.A.42800  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		5.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CUS	ST SVC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	]
SUBTOTAL of Receipts This Page (optional	ત્રી)		105.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 152/310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	statements may not be sold or used by any person name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) DR ROGER ANDERSON Mailing Address 833 OXFORD COURT  City LEWISVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code TX 75056  C  Occupation SVP & CHIEF PHARMACIST Aggregate Year-to-Date  4999.80	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS JAYME ANTONOPLOS Mailing Address 48 WITTE ROAD  City HEWITT FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07421  C  Occupation DIR EXEC CORR  Aggregate Year-to-Date  650.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) MR DAVID ARCISZEWSKI Mailing Address 20 CHADWELL PLAC  City MORRISTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07960  C  Occupation ASST COUNSEL  Aggregate Year-to-Date  650.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Z D D 7  Transaction ID: INC.A.42702  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number	·	242.30

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)			on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) ERIK BAGIN			Date of Receipt
Mailing Address 73 HIGHLAND AVE			12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42934
GLEN RIDGE	NJ	07028	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP	n VP FINANCE	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1300.00	
Full Name (Last, First, Middle Initial) MS BECKIE BARATKO	<b>.</b>		Date of Receipt
Mailing Address 80 N. WOODLAND	STREET		12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42837
ENGLEWOOD	NJ	07631	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		35.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PROI	n POSAL UNIT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 910.00	
Full Name (Last, First, Middle Initial) MR THOMAS BARATTA			Date of Receipt
Mailing Address 69 SKYLINE DR			12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42768
UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	TECHNOLOGY	
Receipt For:	Aggregate	Year-to-Date <b>V</b>	
Primary General Other (specify) ▼		1300.00	
SUBTOTAL of Receipts This Page (optional			135.00

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 154/310   (check only one)   X   11a
Any information copied from such Repor for commercial purposes, other than	orts and Statements may not be sold or used by any pusing the name and address of any political committe	erson for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTION	S INC. POLITICAL ACTION COMMITTEE (a.	.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial MRS BRENDA BASSETT		Date of Receipt
Mailing Address 1752 BLACKS	TONE DRIVE	M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City CARROLLTON	State Zip Code TX 75007	Transaction ID: INC.A.42835  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATL ACCTS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1300.00	
Full Name (Last, First, Middle Initial MR DAVID BAUGH		Date of Receipt
Mailing Address 1813 ADONIS	AVE	1 2 2 2 2 2 0 0 7
City HENDERSON	State Zip Code NV 89074	Transaction ID: INC.A.42890  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 33074	23.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MGR BENEFIT DELIVERY SYST	FMS
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1042.00	·
Full Name (Last, First, Middle Initial MR PETER BEGANS	<b>_</b>	Date of Receipt
Mailing Address 1605 CHARNI	TA CT	1 2 2 2 2 0 0 7
City VIENNA	State Zip Code VA 22182	Transaction ID: INC.A.42730
FEC ID number of contributing federal political committee.	C 22102	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP GOVERNMENT AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	
SUBTOTAL of Receipts This Page (o	ptional)	173.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>V)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 155/310   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may the name and add	not be sold or used by any personant dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR STEPHEN BELL			Date of Receipt
Mailing Address 24 GLENWOOD Re	OAD		12 22 7 2007
City UPPER SADDLE RIVER	State NJ	Zip Code 07458	Transaction ID: INC.A.42903  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	37.00	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAL		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MS EILEEN BIDELL	I		Date of Receipt
Mailing Address 71 WASHINGTON	CT.		12 22 YYYY 12 22
City TOWACO	State NJ	Zip Code 07082	Transaction ID: INC.A.42763
FEC ID number of contributing federal political committee.	C	07002	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	PHARM OPS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 650.00	]
Full Name (Last, First, Middle Initial) MR FLOYD BILLINGS			Date of Receipt
Mailing Address 4273 BROGDAN F.	ARM COURT		M M / D D / Y Y Y Y Y Y 1 Y 1 2 2 2 2 2 0 0 7
City BUFORD	State GA	Zip Code 30518	Transaction ID: INC.A.42778  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1 1 1 1 1	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional	al)		100.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	) <b>/</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 156/310   (check only one)     X   11a
Any information copied from such Reports or for commercial purposes, other than using	and Statements maying the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) BRYAN BIRCH			Date of Receipt
Mailing Address 4 WINDRUSH LA	NE		12 22 2007
City WESTPORT	State CT	Zip Code 06880	Transaction ID: INC.A.42899  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP	n PRES, EMPLOYER GROUF	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 4992.00	
Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO			Date of Receipt
Mailing Address 26 DAYLILY DRIV	/E		12 22 2007
City MOUNT LAUREL	State NJ	Zip Code 08054	Transaction ID: INC.A.42942  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 555.00	
Full Name (Last, First, Middle Initial) MS SUZANNE BLACKBURN			Date of Receipt
Mailing Address 4520 LINWOOD I	LANE		M M / D D / Y Y Y Y Y 1 1 2 2 2 2 0 0 7
City DEEPHAVEN	State MN	Zip Code 55331	Transaction ID: INC.A.42888  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP CLII	n ENT & MKT STRATEGIC DE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (option	nal)		257.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate so for each catego Detailed Summ	ry of the
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or use the name and address of any political	d by any person for the purpose of soliciting contributions al committee to solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS IN	C. POLITICAL ACTION COMMI	TTEE (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MARK BLAKE		Date of Receipt
Mailing Address 129 NORWOOD A	VENUE	1 2 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.42946
MONTCLAIR  FEC ID number of contributing federal political committee.	NJ 07043	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSINESS DEV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	750.00
Full Name (Last, First, Middle Initial) MR JONATHAN BLAUMAN		Date of Receipt
Mailing Address 50 NEW ENGLANI		12 / 22 / 2007
City RAMSEY	State Zip Code NJ 07446	Transaction ID: INC.A.42721  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MKTING & PRODUC	T DEV
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	1300.00
Full Name (Last, First, Middle Initial) MR MICHAEL BOGDA		Date of Receipt
Mailing Address 80 LEONA CT		12 22 2007
City LEVITTOWN	State Zip Code NY 11756	Transaction ID: INC.A.42892  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	650.00
SUBTOTAL of Receipts This Page (options	1 II)	125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 158 / 310 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to a committee to a committee. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MRS HEATHER BONOME  Mailing Address 305 10TH STREET	- NE	Date of Receipt
City	State Zip Code	1 2 2 2 2 0 0 7 Transaction ID: INC.A.42687
WASHINGTON	DC 20002	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	
Full Name (Last, First, Middle Initial) MR DUANE BOSCH		Date of Receipt
Mailing Address 3935 BALSAM LA		12 22 2007
City PLYMOUTH	State Zip Code MN 55441	Transaction ID: INC.A.42586  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) MR JOSEPH BOTTA		Date of Receipt
Mailing Address 109 ARBOR PL		12 22 2007
City BRYN MAWR	State Zip Code PA 19010	Transaction ID: INC.A.42591  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional	al)	60.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 310 (check only one)    X
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			n for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a.	Medco Health PAC)
Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX	070557		Date of Receipt
Mailing Address 3380 SADDLEBROOK		7in Oada	1 2 2 2 2 0 0 7
City LAS VEGAS	State NV	Zip Code 89141	Transaction ID: INC.A.42529
FEC ID number of contributing federal political committee.	C	09141	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHA	n IRM PRACTICE	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MS HEIDI BOWMAN			Date of Receipt
Mailing Address 15 DAWN LANE			12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42885
RINGWOOD	NJ	07456	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n HLTH MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 780.00	
Full Name (Last, First, Middle Initial) MR CHRISTOPHER BRADBURY			Date of Receipt
Mailing Address 3 DEER HORN TRAIL			12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42594
UPPER SADDLE RIVER	NJ	07458	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CARI	n E ENHANCING SOLUTIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	·····	65.00

SCHEDULE A (FEC Form 3)	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 310 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS PATRICIA BRANUM  Mailing Address 210 FROG HOLLO	OW ROAD		Date of Receipt
City COATESVILLE FEC ID number of contributing	State PA	Zip Code 19320	Transaction ID: INC.A.42830  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	<del>- '</del> -	n & PROCESS ENGINEERIN	75.00 IG
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	riggregate	1950.00	
MR DAVID BREEN  Mailing Address 27 SEALS DR			Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State	Zip Code	Transaction ID: INC.A.42811
MONROE  FEC ID number of contributing federal political committee.	C	10950	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS		LYTICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR JOHN BRENNAN	•		Date of Receipt
Mailing Address 2 CARMEN LANE			12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42922
FLEMINGTON  FEC ID number of contributing federal political committee.	C	08822	Amount of Each Receipt this Period  10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP AUDI		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (option	al)		110.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 161/310   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any perso dress of any political committee to	or for the purpose of soliciting contributions or solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR PAUL BRISSON			Date of Receipt
Mailing Address 469 MANOR LANE			12 22 22 2007
City PELHAM MANOR	State NY	Zip Code 10803	Transaction ID: INC.A.42658  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	n DDUCT DEVELOPMENT	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	e Year-to-Date ▼ 420.00	
Full Name (Last, First, Middle Initial) MR RICHARD BROOKLER			Date of Receipt
Mailing Address 9 ROMARY COURT	Γ		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GLEN ROCK	State NJ	Zip Code 07452	Transaction ID: INC.A.42565  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07432	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n FINANCE	
Receipt For:  Primary General  Other (specify) ▼	- 1 ·	e Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) MR KENNETH BROWN			Date of Receipt
Mailing Address 540 GIORDANO DE	RIVE		12 22 2007
City YORKTOWN HEIGHTS	State NY	Zip Code 10598	Transaction ID: INC.A.42588  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10000	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO	n TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	<del>_ , '</del>	e Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (optional	)		100.00

SCHEDULE A (FEC FOR ITEMIZED RECEIPTS	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 162 / 310 (check only one)    X   11a
or for commercial purposes, other  NAME OF COMMITTEE (In Fu	than using the name and ad	ay not be sold or used by any pers ddress of any political committee to ACTION COMMITTEE (a.k.:	on for the purpose of soliciting contributions o solicit contributions from such committee.  a. Medco Health PAC)
Full Name (Last, First, Middle I MS VIVIAN BULGER Mailing Address 120 EAST  City WASHINGTONVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTION  Receipt For:	State NY  C  Occupation SR DIR	FINANCE	Date of Receipt  1 2 2 2 2 0 0 7  Transaction ID: INC.A.42808  Amount of Each Receipt this Period  20.00
Primary Genera Other (specify)  Full Name (Last, First, Middle I MS MARY BURKE Mailing Address 638 LENO	nitial)	te Year-to-Date  520.00	Date of Receipt
City  WESTFIELD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTION  Receipt For:  Primary General Other (specify)	State NJ  C  Occupation EXEC D  Aggregat	Zip Code 07090  on DIR MEDICARE CLIENT PRO te Year-to-Date  260.00	Transaction ID: INC.A.42654  Amount of Each Receipt this Period  10.00
Full Name (Last, First, Middle I MR KEVIN BURON Mailing Address 25 TIMBEI  City ALISO VIEJO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTION  Receipt For: Primary General Other (specify)	State CA C Occupation GENER Aggregat	Zip Code 92656  on AL MGR GROUP te Year-to-Date ▼	Date of Receipt    M M M
SUBTOTAL of Receipts This Page	ge (optional)		80.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 / 310 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	atements may not be sold or used by any perso name and address of any political committee to OLITICAL ACTION COMMITTEE (a.k.a.	
Full Name (Last, First, Middle Initial) MRS PEGEEN BUTTERFIELD Mailing Address 23 NUTTING PLACE  City WEST CALDWELL FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07006  C  Occupation SR DIR BUSINESS DEVELOPMENT	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MRS DOREEN CALDER  Mailing Address 441 S ELM STREET  City MAYWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07607  C  Occupation DIR BUSINESS REQUIREMENTS Aggregate Year-to-Date  1040.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: INC.A.42526  Amount of Each Receipt this Period  40.00
Full Name (Last, First, Middle Initial) MR GABRIEL CAPPUCCI Mailing Address 119 WASHINGTON AV  City CHATHAM  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07928  C  Occupation VP FINANCE  Aggregate Year-to-Date ▼	Date of Receipt    M M
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	115.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 164 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC	:. POLITICAL ACTION COMMITTEE (a.k.a.	Medco Health PAC)
MR GERALD CARDONE  Mailing Address 3 MEADOW LANE		Date of Receipt
City	State Zip Code	1 2 2 2 2 0 0 7  Transaction ID: INC.A.42858
ANNANDALE  FEC ID number of contributing federal political committee.	NJ 08801	Amount of Each Receipt this Period  10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FACILITY PLANNING & DESIGN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) MR RAYMOND CARLUCCI Mailing Address 24 SHERL DRIVE		Date of Receipt
Mailing Address 24 SHERI DRIVE		12 22 2007
City ALLENDALE	State Zip Code NJ 07401	Transaction ID: INC.A.42802  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	52.50
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERAL MGR GROUP	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1365.00	
Full Name (Last, First, Middle Initial) MS CATHERINE CASALE		Date of Receipt
Mailing Address 16345 HEATHROW	DRIVE	12 22 2007
City TAMPA	State Zip Code FL 33647	Transaction ID: INC.A.42853  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	13.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 338.00	
SUBTOTAL of Receipts This Page (optional	)	75.50

Information copied from such Reports and commercial purposes, other than using the AME OF COMMITTEE (In Full) IEDCO HEALTH SOLUTIONS INC.  III Name (Last, First, Middle Initial) S MARY CASALE ailing Address 822 CEDAR AVE  Into the second se	e name and address of any politic	al committee to s	Date of Receipt  1 2 2 2 2 0 0 7  Transaction ID: INC.A.42711  Amount of Each Receipt this Period  25.00
IEDCO HEALTH SOLUTIONS INC.  JII Name (Last, First, Middle Initial) S MARY CASALE ailing Address 822 CEDAR AVE  JITY  ADDENFIELD  EC ID number of contributing deral political committee.  Jame of Employer EDCO HEALTH SOLUTIONS  ecceipt For:  Primary General	State Zip Code NJ 08033  C Occupation VP SALES STRATEGY		Date of Receipt    M M
S MARY CASALE ailing Address 822 CEDAR AVE sity ADDENFIELD EC ID number of contributing deral political committee.  ame of Employer EDCO HEALTH SOLUTIONS ecceipt For: Primary General	NJ 08033  C Occupation VP SALES STRATEGY	& MARKETING	Transaction ID: INC.A.42711  Amount of Each Receipt this Period  25.00
ADDENFIELD  EC ID number of contributing deral political committee.  ame of Employer EDCO HEALTH SOLUTIONS  eceipt For:  Primary General	NJ 08033  C Occupation VP SALES STRATEGY	& MARKETING	Transaction ID: INC.A.42711  Amount of Each Receipt this Period  25.00
ADDENFIELD  EC ID number of contributing deral political committee.  ame of Employer EDCO HEALTH SOLUTIONS  eceipt For:  Primary General	NJ 08033  C Occupation VP SALES STRATEGY	& MARKETING	Amount of Each Receipt this Period 25.00
EC ID number of contributing deral political committee.  ame of Employer EDCO HEALTH SOLUTIONS  eceipt For:  Primary General	Occupation VP SALES STRATEGY	& MARKETING	25.00
eceipt For: Primary General	VP SALES STRATEGY	& MARKETING	- G
Primary General	Aggregate Year-to-Date ▼		_
		650.00	
S KAREN CATHCART RUSSELL	3		Date of Receipt
aming Address 146 OLOBI IOOSE DI			12 22 2007
•	•		Transaction ID: INC.A.42553
EC ID number of contributing	C 29112	•	Amount of Each Receipt this Period  25.00
ame of Employer EDCO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL SVC	S	1
eceipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	650.00	_
, , , , , , , , , , , , , , , , , , , ,			Date of Receipt
ailing Address 14917 E BELLA VIST	·A		12 22 2007
	State Zip Code		Transaction ID: INC.A.42695
EC ID number of contributing	C 99037	1	Amount of Each Receipt this Period  10.00
ame of Employer EDCO HEALTH SOLUTIONS	Occupation DIR PHARM PRACTICE	<u> </u>	1
eceipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	400.00	
STOTAL of Receipts This Page (optional)			60.00
	ull Name (Last, First, Middle Initial) S KAREN CATHCART RUSSELL ailing Address 148 CLUBHOUSE DF  ity VEST COLUMBIA  EC ID number of contributing deral political committee.  ame of Employer IEDCO HEALTH SOLUTIONS  eceipt For: Primary General Other (specify) ▼  Ull Name (Last, First, Middle Initial) R JASON COLE ailing Address 14917 E BELLA VIST  ity ERADALE  EC ID number of contributing deral political committee.  ame of Employer IEDCO HEALTH SOLUTIONS  eceipt For: Primary General Other (specify) ▼  STOTAL of Receipts This Page (optional)	Primary Other (specify) ▼  UII Name (Last, First, Middle Initial) S KAREN CATHCART RUSSELL ailing Address 148 CLUBHOUSE DR ity  VEST COLUMBIA  EC ID number of contributing deral political committee.  Ame of Employer EDCO HEALTH SOLUTIONS  eccipt For:  Primary General Other (specify) ▼  UII Name (Last, First, Middle Initial) R JASON COLE ailing Address 14917 E BELLA VISTA ity  ERADALE State Zip Code WA 99037  C  C  C  C  C  C  C  C  C  C  C  C  C	Primary Other (specify) ▼ 650.00  Ill Name (Last, First, Middle Initial) S KAREN CATHCART RUSSELL ailing Address 148 CLUBHOUSE DR ity State Zip Code SC 29172  EC ID number of contributing deral political committee.  Image: Aggregate Year-to-Date ▼ Primary Occupation SR DIR CLINICAL SVCS  Ill Name (Last, First, Middle Initial) R JASON COLE ailing Address 14917 E BELLA VISTA  Interpretation of Employer State Zip Code WA 99037  EC ID number of contributing deral political committee.  Interpretation of Employer State State Zip Code WA 99037  EC ID number of contributing deral political committee.  Interpretation of Employer State S

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 166 / 310 (check only one)    X   11a
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person the name and address of any political committee to committee. POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR FRANK COLIANO Mailing Address 5176 BALDWIN TE  City MARIETTA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	RRACE  State Zip Code GA 30068  C  Occupation NATL ACCT EXEC Aggregate Year-to-Date	Date of Receipt    M   M   2 2   2 0 0 7
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) WILLIAM CONSIDINE  Mailing Address 130 WEST 67TH S	390.00	Date of Receipt
City NEW YORK  FEC ID number of contributing federal political committee.	State Zip Code NY 10023	Transaction ID: INC.A.42913 Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation SR DIR BUSINESS PLANNING & DE Aggregate Year-to-Date  650.00	<u>=v</u>
Full Name (Last, First, Middle Initial) MR ROBERT COOK Mailing Address 270 S FRANKLIN T	URNPIKE	Date of Receipt  1 2 2 2 2 2 0 0 7
City RAMSEY  FEC ID number of contributing federal political committee.	State Zip Code NJ 07446	Transaction ID: INC.A.42581  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HLTH CARE OPS-TECHNOLOG	Y
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optiona	l)	65.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 167 / 310 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. P	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) ANTONIO CORREIA			Date of Receipt
Mailing Address 30 EAST 81ST STREE	T, #9B		12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42949
NEW YORK	NY	10028	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP BUSI	n NESS DEV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) MR STEPHEN COURTMAN			Date of Receipt
Mailing Address 25 FAIRWAY TRAIL			M M / D D / Y Y Y Y Y Y Y 12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42686
SPARTA	NJ	07871	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHAI	n RMACY NETWORK MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR HART COVEN			Date of Receipt
Mailing Address 28 OAK LANE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.42777
MORRISTOWN	NJ	07960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFC	n ) TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	·····	150.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 168 / 310 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ROBERT CRAIG Mailing Address 7979 E SANTA CA	TALINA DR		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City SCOTTSDALE FEC ID number of contributing	State AZ	Zip Code 85255	Transaction ID: INC.A.42670  Amount of Each Receipt this Period  60.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation EXEC DI	n R PRODUCT Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR ANGELO CUOZZO Mailing Address 19 IDA COURT			Date of Receipt  1 2 2 2 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42715
STATEN ISLAND  FEC ID number of contributing federal political committee.	C	10312	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	n HNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MS ROSELIN DANIEL			Date of Receipt
Mailing Address 17 DEVONSHIRE	DRIVE		M M / D D / Y Y Y Y Y 1 Y 1 2 2 2 2 0 0 7
City RANDOLPH	State NJ	Zip Code 07869	Transaction ID: INC.A.42783
FEC ID number of contributing federal political committee.	C	07809	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	n BENEFIT DELIVERY SYS	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	Year-to-Date ▼ 650.00	
	1		110.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 169 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person g the name and address of any political committee to a C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR KENNETH DANIELS  Mailing Address 2903 CHUKKAR C	COURT State Zip Code	Date of Receipt  1 2 2 2 2 0 0 7  Transaction ID: INC.A.42759
PLANT CITY  FEC ID number of contributing federal political committee.	FL 33567	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP/GM  Aggregate Year-to-Date ▼  1300.00	
Full Name (Last, First, Middle Initial)  MS MARY DASCHNER  Mailing Address 2926 EWING AVE	S	Date of Receipt  1 2 2 2 2 0 0 7
City MINNEAPOLIS	State Zip Code MN 55416	Transaction ID: INC.A.42656  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP & GENERAL MGR MEDICARE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 4999.80	
Full Name (Last, First, Middle Initial) DR AMITA DASMAHAPATRA Mailing Address 24 CHARLOTTE H	HILL DR	Date of Receipt
City BERNARDSVILLE	State Zip Code NJ 07924	Transaction ID: INC.A.42576
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR MEDICAL POLICY & PROG	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (option	al)	227.30

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 170 / 310   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	ly not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ANDREW DAVIS			Date of Receipt
Mailing Address 5616 BROOK DRIV	E		12 22 2007
City EDINA	State MN	Zip Code 55439	Transaction ID: INC.A.42668  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00700	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MED	n ICARE CLIENT & SALES SI	— JP
Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR DANIEL DAVISON	<b>I</b>		Date of Receipt
Mailing Address 402 HIGHLAND AVI	E		12 22 YYYYY 12 22 2007
City RIDGEWOOD	State NJ	Zip Code 07450	Transaction ID: INC.A.42803
FEC ID number of contributing federal political committee.	C	07430	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRIC		
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR LUCA DEFLORENTIIS			Date of Receipt
Mailing Address W62 N1032 FAIRHA	AVEN CT		12 22 2007
City CEDARBURG	State WI	Zip Code 53012	Transaction ID: INC.A.42731  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	n ACCT MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional	)		125.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 171 / 310 (check only one)    X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۸.	Full Name (Last, First, Middle Initial) MS BARBARA DELLEDONNA			Date of Receipt
	Mailing Address 199 SANFORD AVE			12 22 2007
	City	State	Zip Code	Transaction ID: INC.A.42840
	EMERSON	NJ	07630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on E-COM BUSINESS OPS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	
_	Full Name (Last, First, Middle Initial) MR PAUL DELLO RUSSO			Date of Receipt
	Mailing Address 80 HILLSIDE AVENUI	E		12 22 2007
	City	State	Zip Code	Transaction ID: INC.A.42704
	GLEN RIDGE	NJ	07028	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		OUNSEL	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
	Other (specify)	0 0	650.00	
	Full Name (Last, First, Middle Initial) MS TONI DEMANSS	•		Date of Receipt
	Mailing Address 32 RED BARN LANE			12 22 2007
	City	State	Zip Code	Transaction ID: INC.A.42921
	WEST MILFORD	NJ	07480	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR FINA		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		400.00	
	SUBTOTAL of Receipts This Page (optional)			60.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 172 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any person the name and address of any political committee to . POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS MAUREEN DEMPSEY  Mailing Address 17 RICHWOOD PLA  City  DENVILLE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code NJ 07834  C  Occupation DIR MEDICARE COMPLIANCE  Aggregate Year-to-Date  650.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 2 2 2 2 0 0 7  Transaction ID: INC.A.42936  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) DONNA DENARDO  Mailing Address W2996 GIBRALTER  City FISH CREEK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code WI 54212  C  Occupation SVP & GENERAL MGR MEDICARE  Aggregate Year-to-Date   384.60	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MR JOHN DERRICO  Mailing Address 195 HACKENSACK  City  HARRINGTON PARK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	AVENUE  State Zip Code NJ 07640  C  Occupation SR DIR MARKETING  Aggregate Year-to-Date  400.00	Date of Receipt  M M / D D / Y Y Y Y Y  1 2 2 2 2 2 0 0 7  Transaction ID: INC.A.42896  Amount of Each Receipt this Period  25.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	242.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 173 / 310 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS KAREN DEZEARN			Date of Receipt
Mailing Address 3625 PATTERSTONE	DR		12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42555
ALPHARETTA	GA	30022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR WILLIS DINGLE			Date of Receipt
Mailing Address 17826 ARBOR GREEN	IE DR		M M / D D / Y Y Y Y Y Y Y 12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42627
TAMPA	FL	33647	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR ROBERT DOLAN			Date of Receipt
Mailing Address 9 CRANE AVENUE			12 / 22 / 7 7 7 7
City	State	Zip Code	Transaction ID: INC.A.42784
WEST CALDWELL	NJ	07006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR BEN	n IEFIT DELIVERY SYSTEMS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional)			75.00

or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Pull Name (Last, First, Middle Initial)  Mis MERIDITH DORNER  Mailing Address 4448 CREEK ROAD  City State Zip Code ALLENTOWN PA 18104  FEC ID number of contributing federal political committee.  Name of Employer  MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify Y  Aggregate Year-to-Date Y  Primary General Other (specify Y  Aggregate Year-to-Date Y  Primary General Other (specify Y  Aggregate Year-to-Date Y  PomoNA  Pull Name (Last, First, Middle Initial) MR H. POMONA  Receipt For: Primary General Other (specify Y  Aggregate Year-to-Date Y  Date of Receipt Initial Y  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  C.  Full Name (Last, First, Middle Initial) MR DANA DUNCAN Mailing Address 72 HALLEY DR  City State Zip Code Other (specify Y  Aggregate Year-to-Date Y  POMONA  NY 10970  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)  Aggregate Year-to-Date Y	ITEMIZE  Any informati	JLE A (FEC Form 3X) D RECEIPTS on copied from such Reports and Sta	itements may	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 174 / 310 (check only one)    X
AL MS MERIDITH DORNER  Mailing Address 4448 CREEK ROAD  City  ALLENTOWN  PA 19104  FEC ID number of contributing federal political committee.  C C  Cocupation  SR DIR ACCT MGMT  Receipt For:  Primary General Other (specify) ▼  State Zip Code  Amount of Each Receipt this Period  C C  Date of Receipt  Transaction ID: INC.A.42571  Amount of Each Receipt this Period  ED Date of Receipt  Transaction ID: INC.A.42571  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.42571  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.42643  Amount of Each Receipt this Period  C State Zip Code  IRVINE  FEC ID number of contributing federal political committee.  C Secupation  VP CONTRACT ADMINISTRATOR  Receipt For:  Primary General  Other (specify) ▼  State Zip Code  Aggregate Year-to-Date ▼  Primary General  Other (specify) ▼  Date of Receipt  Transaction ID: INC.A.42843  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.42843  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.42744  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.42714  Amount of Each Receipt this Period  ED Date of Receipt  Transaction ID: INC.A.42714  Amount of Each Receipt this Period  ED Date of Receipt  Transaction ID: INC.A.42714  Amount of Each Receipt this Period  ED Date of Receipt  Transaction ID: INC.A.42714  Amount of Each Receipt this Period  ED Date of Receipt  Transaction ID: INC.A.42714  Amount of Each Receipt this Period  ED Date of Receipt  Transaction ID: INC.A.42714  Amount of Each Receipt this Period  ED Date of Receipt  Transaction ID: INC.A.42714  Amount of Each Receipt this Period  ED Date of Receipt  Transaction ID: INC.A.42714  Amount of Each Receipt this Period  ED Date of Receipt  Transaction ID: INC.A.42714  Amount of Each Receipt this Period  ED Date of Receipt  Transaction ID: INC.A.42714  Amount of Each Receipt this Period  ED Date of Receipt  Transaction ID: INC.A.42714  Amount of Each Receipt this Perio	or for comme	rcial purposes, other than using the n COMMITTEE (In Full)	ame and add	dress of any political committee to	solicit contributions from such committee.
City ALLENTOWN PA 19104  FEC ID number of contributing lederal political committee.  Name of Employer Primary General Other (specify) ▼  City State Zip Code CA 92614  FEC ID number of contributing lederal political committee.  City State Zip Code CA 92614  FEC ID number of contributing lederal political committee.  Date of Receipt  Transaction ID: INC. A. 42571  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC. A. 42571  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC. A. 42571  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC. A. 42571  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC. A. 42571  Amount of Each Receipt this Period  Transaction ID: INC. A. 42571  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC. A. 42571  Amount of Each Receipt this Period  Transaction ID: INC. A. 42571  Transaction ID: INC. A. 42714  Transactio	MS MERIC	DITH DORNER			M " M / D " D / Y " Y " Y " Y
ALLENTOWN FEC ID number of contributing dederal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:   Primary   General Other (specify) ▼	City		Ctoto	Zin Codo	
FEC ID number of contributing rederal political committee.  Name of Employer WEDOC HEALTH SOLUTIONS  Receipt For:    Date of Receipt   Primary   General		OWN		•	
Receipt For:     Primary	FEC ID no	umber of contributing			
Primary General Other (specify) ▼ 650.00  Full Name (Last, First, Middle Initial) MR H-RONALD DRIZIN Mailing Address 17 DAYBREAK  City State Zip Code CA 92614  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼ 1300.00  City State Zip Code Transaction ID: INC.A.42843  Amount of Each Receipt this Period FEC ID number of Contributing federal political committee.  Date of Receipt For: Primary General Other (specify) ▼ 1300.00  Date of Receipt Tore Transaction ID: INC.A.42714  Date of Receipt Tore Transaction ID: INC.A.42714  Amount of Each Receipt this Period Transaction ID: INC.A.42714  Amount of Ea					
MR H.RONALD DRIZIN  Mailing Address 17 DAYBREAK  City State Zip Code CA 92614  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  City State Zip Code CA 92614  FUIl Name (Last, First, Middle Initial)  MR DANA DUNCAN  Mailing Address 72 HALLEY DR  City State Zip Code NY 19970  City State Zip Code Transaction ID: INC.A.42843  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.42843  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.42843  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.42714  Amount of Each Receipt  Transaction ID: INC.A.42714  Amount of Each Receipt this Period  EC 10 number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	Prim	nary General	Aggregate	650.00	
City State Zip Code  CA 92614  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  State Zip Code NATION ID: INC. A. 42843  Amount of Each Receipt this Period  Coccupation VP CONTRACT ADMINISTRATOR  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) MR DANA DUNCAN Mailing Address 72 HALLEY DR  City State Zip Code NY 10970  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Coccupation SR DIR TECHNOLOGY  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼					Date of Receipt
IRVINE  CA 92614  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR DANA DUNCAN  Mailing Address 72 HALLEY DR  City State Zip Code NY 10970  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Occupation  SR DIR TECHNOLOGY  Aggregate Year-to-Date ▼  Cocupation  SR DIR TECHNOLOGY  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC. A.42714  Amount of Each Receipt this Period		ddress 17 DAYBREAK			12 22 2007
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  City State Zip Code NY 10970  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  FILL Name (Last, First, Middle Initial)  MR DANA DUNCAN  Mailing Address 72 HALLEY DR  City State Zip Code NY 10970  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt Transaction ID: INC.A.42714  Amount of Each Receipt this Period  C 25.00  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Occupation SR DIR TECHNOLOGY  Aggregate Year-to-Date ▼  Other (specify) ▼  Aggregate Year-to-Date ▼	•			•	
Receipt For:    Primary	FEC ID no			92014	
Primary Other (specify) ▼  Full Name (Last, First, Middle Initial) MR DANA DUNCAN Mailing Address 72 HALLEY DR  City State Zip Code POMONA NY 10970  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  1300.00  Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Name of E MEDCO I	Employer HEALTH SOLUTIONS			
Mailing Address 72 HALLEY DR  City State Zip Code POMONA NY 10970  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Date of Receipt  M M M	Prim	nary General	Aggregate		
City POMONA State Zip Code NY 10970  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  12 22 2007  Transaction ID: INC.A.42714  Amount of Each Receipt this Period  25.00  Aggregate Year-to-Date ▼  100.00		,			Date of Receipt
City State Zip Code NY 10970  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  State Zip Code NY 10970  C Amount of Each Receipt this Period  25.00  C 25.00	Mailing Ac	ddress 72 HALLEY DR			
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)  Other (specify)  Aggregate Year-to-Date  650.00	•			Zip Code	
Receipt For:  Primary Other (specify) ▼  Occupation SR DIR TECHNOLOGY  Aggregate Year-to-Date  650.00	<u>POMON</u>	IA	NY	10970	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  650.00			С		25.00
Primary General Other (specify) ▼ 650.00			SR DIR	TECHNOLOGY	
SUBTOTAL of Receipts This Page (optional)	Prim	nary General	Aggregate	1 1 1 1 1 1 1	
	SUBTOTAL	of Receipts This Page (optional)			100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X)</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 175/310 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	g the name and addre	ss of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR PETER DUNLEAVY Mailing Address 2 DECKER TERRA		7's Oads	Date of Receipt  1 2 2 2 2 0 0 7
City KINNELON  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07405	Transaction ID: INC.A.42595  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation DIR FINAN Aggregate Ye	CE ear-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial)  MR STEPHEN DUNLEAVY  Mailing Address 14026 KNOX STRI	EET		Date of Receipt  1 2 2 2 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42623
OVERLAND PARK  FEC ID number of contributing federal political committee.	C	66221	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP SALES	SEGMENT LEADER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 1300.00	]
Full Name (Last, First, Middle Initial) MR MARK DUNN	I		Date of Receipt
Mailing Address 2 OLD MILL ROAD	)		12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42598
SANDY HOOK  FEC ID number of contributing federal political committee.	CT	06482	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TE	CHNOLOGY	
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional	al)		100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b>	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 1/6/310   (check only one)     X   11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR YAACOV DUSHEK			Date of Receipt
Mailing Address 312 MEGAN CT			12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42773
WYCKOFF  FEC ID number of contributing federal political committee.	NJ C	07481	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n BENEFIT DELIVERY SYS	
Receipt For: Primary General Other (specify)	<del>- '</del>	e Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MS GEORGIA EDDLEMAN			Date of Receipt
Mailing Address 908 EDGEMEER LA	ANE		M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
City SOUTHLAKE	State TX	Zip Code	Transaction ID: INC.A.42872
FEC ID number of contributing federal political committee.	C	76092	Amount of Each Receipt this Period  34.45
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1791.40	
Full Name (Last, First, Middle Initial) MR MICHAEL EDWARDS			Date of Receipt
Mailing Address 109 KAREN PLACE			M M / D D / Y Y Y Y Y Y 12 22 2007
City WYCKOFF	State NJ	Zip Code 07481	Transaction ID: INC.A.42587
FEC ID number of contributing federal political committee.	C	0/461	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optiona	)		109.45

ITEMIZED RE			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 177 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
or for commercial pur  NAME OF COMM	rposes, other than using the nar AITTEE (In Full)	me and add	not be sold or used by any person dress of any political committee to ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions solicit contributions from such committee.  . Medco Health PAC)
DR WOODY EISE	First, Middle Initial) NBERG, MD 128 SUMMIT AVENUE			Date of Receipt  1 2 2 2 2 0 0 7
City		State	Zip Code	Transaction ID: INC.A.42924
UPPER MONT	CLAIR	NJ	07043	Amount of Each Receipt this Period
FEC ID number o federal political co		C		50.00
Name of Employe MEDCO HEALTH	r H SOLUTIONS	Occupation MEDICAL	n RE CHIEF MEDICAL OFFIC	ER
Receipt For: Primary Other (spec	General iffy) ▼	Aggregate	Year-to-Date ▼ 1300.00	
Full Name (Last, F	First, Middle Initial) ELSTON			Date of Receipt
	106 GRAHAM TERRACE			12 22 7 2007
City SADDLE BRO	∩k	State NJ	Zip Code 07663	Transaction ID: INC.A.42774
FEC ID number of federal political co	f contributing	C	07003	Amount of Each Receipt this Period  25.00
Name of Employe MEDCO HEALTH	r H SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
Receipt For: Primary Other (spec	General	Aggregate	Year-to-Date ▼ 650.00	
Full Name (Last, F	First, Middle Initial)			Date of Receipt
Mailing Address	22 BARNARD RD			1 2 2 2 2 2 0 0 7
City WARWICK		State RI	Zip Code 02886	Transaction ID: INC.A.42690  Amount of Each Receipt this Period
FEC ID number o federal political co		C		10.00
Name of Employe MEDCO HEALTH	r H SOLUTIONS	Occupation DIR CLIN	IICAL SVCS	
Receipt For: Primary Other (spec	General		Year-to-Date ▼ 260.00	
SUBTOTAL of Rec	eipts This Page (optional)			85.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 178 / 310 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any perse name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR BRAD EPSTEIN  Mailing Address 359 LONG HILL ROA  City BRIARCLIFF MANOR  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	D EAST  State Zip Code NY 10510  C  Occupation VP CORP COMMUNICATIONS  Aggregate Year-to-Date ▼  1300.00	Date of Receipt    M
Full Name (Last, First, Middle Initial) DR ROBERT EPSTEIN Mailing Address 75 TWEED BLVD  City UPPER GRANDVIEW  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 10960  C  Occupation CMO SVP MEDICAL&ANLYTC AFF Aggregate Year-to-Date  5000.00	Date of Receipt    M   M   2 2   2 0 0 7
Full Name (Last, First, Middle Initial) MR SCOTT ERHARDT  Mailing Address 11540 39TH AVE N  City PLYMOUTH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code MN 55441  C  Occupation SR DIR ACCT MGMT  Aggregate Year-to-Date   390.00	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional)		257.25

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 179 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and add	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR YAKOV ESTERLIS  Mailing Address 800 PALISADE AVE  APT 706  City  FORT LEE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:		Zip Code 07024  on BENEFIT DELIVERY SYS e Year-to-Date	Date of Receipt    M M M
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR STEVEN FANDETTI Mailing Address 15804 SORAWATER	DR.	650.00	Date of Receipt
City LITHIA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)		Zip Code 33547  on CCT EXEC e Year-to-Date ▼ 390.00	Transaction ID: INC.A.42606  Amount of Each Receipt this Period  15.00
Full Name (Last, First, Middle Initial) DR RICHARD FEIFER Mailing Address 32 EILEEN DR  City MAHWAH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	<del>- ' '</del>	Zip Code 07430  on E ENHANCING SOLUTIONS e Year-to-Date  1300.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		·····	90.00

	ILE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 180 / 310 (check only one)    X
or for comme	on copied from such Reports and Starcial purposes, other than using the IFCOMMITTEE (In Full) HEALTH SOLUTIONS INC. P	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.  a. Medco Health PAC)
MR THOM Mailing Ac City GILLET FEC ID nu federal po	umber of contributing litical committee. Employer HEALTH SOLUTIONS		Zip Code 07933 n RP MKTG & E-COMM	Date of Receipt    M M M
Full Name MS DAWN	er (specify)   (Last, First, Middle Initial)  FELDNER  ddress 275 BIRCH STREET	State	4997.98 Zip Code	Date of Receipt    M
EMERSO FEC ID not federal po Name of EMEDCO I Receipt Fo	umber of contributing litical committee. Employer HEALTH SOLUTIONS or:	C Occupation DIR BUS	07630	Amount of Each Receipt this Period  25.00
City RIDGEV FEC ID not federal po  Name of EMEDCO FRIENDED FOR Print	umber of contributing litical committee. Employer HEALTH SOLUTIONS or:		Zip Code 07450 n CARD OPS e Year-to-Date ▼	Date of Receipt    M
SUBTOTAL	of Receipts This Page (optional)		<b>_</b>	242.23

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 181 / 310 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	e name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR DON FISCHER Mailing Address 10 TRACY CIRCLE  City CAMPBELL HALL  FEC ID number of contributing	State NY	Zip Code 10916	Date of Receipt    M M
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del>, '</del>	n OM STRAT & DELIV e Year-to-Date ▼ 650.00	25.00
Full Name (Last, First, Middle Initial) MR EDWARD FISCHER Mailing Address 465 OLD STONE RD  City RIDGEWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	, ·	Zip Code 07450  n ICARE OPS 2 Year-to-Date  1300.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR ANTHONY FLOWERS Mailing Address 1933 MT. OLIVE AGOSTA ROAD City NEW BLOOMINGTON FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	1 '	Zip Code 43341 n HLTH CARE OPS e Year-to-Date ▼ 650.00	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional)			100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 182 / 310 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	Statements may not be sold or used by any personal part of the name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR PAUL FORTUNATO, III Mailing Address 18 WINDING RIDGE  City OAKLAND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07436  C  Occupation SR NATL ACCT EXEC  Aggregate Year-to-Date  260.00	Date of Receipt    M   M   22   2007    Transaction ID: INC.A.42600  Amount of Each Receipt this Period    10.00
Full Name (Last, First, Middle Initial) MR JOSEPH FRENDO Mailing Address 9 GREEN HILL TRAIL City TROPHY CLUB FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code TX 76262  C  Occupation VP/GM  Aggregate Year-to-Date  2600.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR ANDREW FRIEDELL Mailing Address 1434 NARRAGANSET  City CRANSTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code RI 02905  C  Occupation SR DIR GOV AFFAIRS  Aggregate Year-to-Date  780.00	Date of Receipt  M M M
SUBTOTAL of Receipts This Page (optional)		90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 183 / 310 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by any personame and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.:	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR JOSEPH GALARDI Mailing Address 24 MOREHOUSE PL  City NEW PROVIDENCE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State Zip Code NJ 07974  C  Occupation VP & COUNSEL  Aggregate Year-to-Date	Date of Receipt    M
Primary General Other (specify)  Full Name (Last, First, Middle Initial) MS PAMELA GALASSINI Mailing Address 720 N. LARRABEE	1300.00	Date of Receipt
APT 1701 City CHICAGO FEC ID number of contributing federal political committee.	State Zip Code IL 60610	Transaction ID: INC.A.42884  Amount of Each Receipt this Period  192.25
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	Occupation GENERAL MGR  Aggregate Year-to-Date   5000.00	
Full Name (Last, First, Middle Initial) MS IRENE GALE Mailing Address 3 MAIZE TRAIL		Date of Receipt  1 2 2 2 2 0 0 7
City PLACITAS  FEC ID number of contributing federal political committee.	State Zip Code NM 87043	Transaction ID: INC.A.42647  Amount of Each Receipt this Period  10.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR DIR CLINICAL SVCS Aggregate Year-to-Date  260.00	
SUBTOTAL of Receipts This Page (optional)		252.25

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 184 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal statements and address of any political committee to	
	. POLITICAL ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS IVY GALLACCHI Mailing Address 11 LAKE AVENUE		Date of Receipt
City	State Zip Code	1 2 2 2 2 0 0 7  Transaction ID: INC.A.42923
MALTA	NY 12020	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INFO TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) MS PATRICIA GALLAGHER		Date of Receipt
Mailing Address 842 ASHLER CT		12 22 7 2007
City	State Zip Code	Transaction ID: INC.A.42845
COLUMBUS	OH 43235	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	420.00	
Full Name (Last, First, Middle Initial) MR BARNEY GALLASSIO		Date of Receipt
Mailing Address 69 LAKEVIEW DR		12 / 22 / Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.42738
OLD TAPPAN	NJ 07675	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIENT RELATIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
		85.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 185 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
4.	Full Name (Last, First, Middle Initial) MICHAEL GALVIN	0211107127	torion committee (a.i.a.	Date of Receipt
	Mailing Address 25 BALLYMEADE ROA		7:a Code	12 22 2007
	City HOPEWELL JUNCTION	State NY	Zip Code 12533	Transaction ID: INC.A.42909  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	12000	192.25
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP/CH	n IEF INFRASTRUCTURE OF	── FR
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	
- 3.	Full Name (Last, First, Middle Initial) MR OMHARAISRIRAM GANGAIKONDAN-IYER Mailing Address 9 CAIRNES ROAD			Date of Receipt
				12 22 2007
	City	State	Zip Code	Transaction ID: INC.A.42916
	MORRIS PLAINS  FEC ID number of contributing federal political committee.	NJ C	07950	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNI	n CAL SPECIALIST	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
- ).	Full Name (Last, First, Middle Initial) MR PETER GAYLORD			Date of Receipt
	Mailing Address 1201 BRIDGE STREET	Γ		12 22 YYYY 12 22 2007
	City	State	Zip Code	Transaction ID: INC.A.42514
	ASBURY PARK  FEC ID number of contributing federal political committee.	C	07712	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio	n EASURY & FINANCIAL EVA	— L\$
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 1300.00	
	SUBTOTAL of Receipts This Page (optional)			267.25
f	TOTAL This Period (last page this line number of	anly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 186 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	Statements may not be sold or used by any person ename and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR FRANK GENTILELLA Mailing Address 20 BROOKSHIRE DR  City ROBBINSVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 08691  C  Occupation GENERAL MGR GROUP  Aggregate Year-to-Date   1300.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MATTHEW GIBBS  Mailing Address 27 N. WACKER DR.  SUITE 246  City  CHICAGO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code IL 60606  C  Occupation CHIEF CLINICAL OFFICER  Aggregate Year-to-Date  225.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR ROBERT GIBBS  Mailing Address 544 DENMOOR COUL  City GALLOWAY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code OH 43119  C  Occupation DIR PHARM PRACTICE  Aggregate Year-to-Date   650.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	•	137.50

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 18//310   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR THOMAS GILSON			Date of Receipt
Mailing Address 2 PELL FARM ROA	<b>ND</b>		12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42879
SADDLE RIVER FEC ID number of contributing federal political committee.	NJ C	07458	Amount of Each Receipt this Period  192.25
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) MR SCOTT GILYARD			Date of Receipt
Mailing Address 305 BERGAMOT D	RIVE		12 22 YYYY 12 22 2007
City MEDINA	State MN	Zip Code	Transaction ID: INC.A.42519
FEC ID number of contributing federal political committee.	C	55340	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES UP		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 769.20	
Full Name (Last, First, Middle Initial) MS AUDREY GOODMAN			Date of Receipt
Mailing Address 26 HILLSIDE AVE.			1 2 2 2 2 0 0 7
City GLEN ROCK	State NJ	Zip Code 07452	Transaction ID: INC.A.42820
FEC ID number of contributing federal political committee.	C	07432	Amount of Each Receipt this Period  15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ORG		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 390.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		399.55

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 188 / 310 (check only one)    X   11a
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR JAMES GORMAN  Mailing Address 11 WASHBURN RD	)		Date of Receipt
City CANTON FEC ID number of contributing	State CT	Zip Code 06022	Transaction ID: INC.A.42583  Amount of Each Receipt this Period
rederal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	<del>- ' '</del>	n CLIENT & MKT PROG STRA Year-to-Date ▼	25.00 AT
Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR JAMES GRANT, JR  Mailing Address 1928 BEVERLY LAI	NE		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City BUFFALO GROVE FEC ID number of contributing federal political committee.	State IL	Zip Code 60089	Transaction ID: INC.A.42641  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	<del></del>	n NCIAL INSIGHTS Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial)  MR EDWARD GRIX  Mailing Address 525 ORANGEBURG	G RD		Date of Receipt
City PEARL RIVER	State NY	Zip Code 10965	Transaction ID: INC.A.42662  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation		25.00
Receipt For:  Primary General  Other (specify) ▼	<del></del>	E-COM BUSINESS OPS  Year-to-Date   650.00	
SUBTOTAL of Receipts This Page (optional	)		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 189 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso the name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS GINA GRUHN Mailing Address 13 WEATHER VANE  City CONVENT STATION  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	,	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial)  MS TRACY GRUNSFELD  Mailing Address 264 HARVEST AVE  City  STATEN ISLAND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NY 10310  C  Occupation VP CONSUMER DRIVEN MKTS  Aggregate Year-to-Date  390.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR RICHARD GUIOR Mailing Address 50 BELLEVUE AVE  City SUMMIT FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07901  C  Occupation GROUP COO  Aggregate Year-to-Date  2340.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .  TOTAL This Period (last page this line numbe		130.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>K</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 190 / 310   (check only one)
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	C. POLITICAL <i>F</i>	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MARK HALLORAN			Date of Receipt
Mailing Address 19 KINGS RIDGE	ROAD		12 22 2007
City LONG VALLEY	State NJ	Zip Code 07853	Transaction ID: INC.A.42775
FEC ID number of contributing federal political committee.	C	07653	Amount of Each Receipt this Period  192.25
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation CHIFF IN	n NFO OFFICER	
Receipt For:  Primary General  Other (specify) ▼	<del>-                                    </del>	Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) MR GREGORY HANSEN	<u> </u>		Date of Receipt
Mailing Address 1659 ISABELLA PA	ARKWAY		1 2 2 2 2 0 0 7
City CHASKA	State MN	Zip Code 55318	Transaction ID: INC.A.42883
FEC ID number of contributing federal political committee.	C	33316	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ACCI	n Γ SVCS & ADMIN	
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MS KELLY HANZAWA			Date of Receipt
Mailing Address 1116 OAKCROFT	LANE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State NJ	Zip Code	Transaction ID: INC.A.42846
SOMERSET  FEC ID number of contributing federal political committee.	C	08873	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC	n CT MGMT OPS	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional	<b>I</b>		267.25

SCHEDULE A (FEC For ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 191 / 310 (check only one)    X
or for commercial purposes, other than NAME OF COMMITTEE (In Full)	orts and Statements may not be sold or used by any person using the name and address of any political committee to the sold of	o solicit contributions from such committee.
Full Name (Last, First, Middle Initia MR CHRISTOPHER HARLOW Mailing Address 8 PROSPECT City POMPTON PLAINS FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	, 	Date of Receipt    M   M   22   2007    Transaction ID: INC.A.42564    Amount of Each Receipt this Period   25.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initia MS SHANA HART  Mailing Address 5505 CEDAR	,	Date of Receipt  1 2 2 2 2 0 0 7
City SNYDER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code TX 79549  C  Occupation NATL ACCT EXEC Aggregate Year-to-Date ▼	Transaction ID: INC.A.42697  Amount of Each Receipt this Period  10.00
Other (specify)  Full Name (Last, First, Middle Initia MR PETER HARTY	260.00  W WING COURT  State Zip Code	Date of Receipt  1 2 2 2 2 0 0 7  Transaction ID: INC.A.42517
COLORADO SPRINGS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	CO 80908  C Occupation	Amount of Each Receipt this Period 192.25
Receipt For:  Primary General  Other (specify) ▼	VP GOVERNMENT AFFAIRS  Aggregate Year-to-Date ▼  5000.00	
SUPTOTAL of Possints This Page /	optional)	227.25

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 192 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A 0	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۷.	Full Name (Last, First, Middle Initial) MR BILL HEAD			Date of Receipt
	Mailing Address 501 SLATERS LANE #816			12 22 2007
	City	State	Zip Code	Transaction ID: INC.A.42939
	ALEXANDRIA	VA	22314	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR (	n GOV AFFAIRS	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	_
	Primary ☐ General Other (specify) ▼		650.00	
	Full Name (Last, First, Middle Initial) MR MARK HEGGESTAD	!		Date of Receipt
	Mailing Address 13210 N. 11TH AVE.			12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.42592
	PHOENIX	AZ	85029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SALE		
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		650.00	
_	Full Name (Last, First, Middle Initial) MS EILEEN HEINZ	<u> </u>		Date of Receipt
	Mailing Address 27 DOGWOOD LN			12 22 2007
	City	State	Zip Code	Transaction ID: INC.A.42876
	MONTVALE	NJ	07645	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer MEDCO HEALTH SOLUTIONS		SINESS DEV	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	-
	Other (specify)		260.00	
	SUBTOTAL of Receipts This Page (optional)	<u> </u>		60.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 193 / 310 (check only one)    X
NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR SCOTT HELMUS Mailing Address 23 VALLEY RD		Date of Receipt
City	State Zip Code	1 2 2 2 2 0 0 7 Transaction ID: INC.A.42574
SUCCASUNNA	NJ 07876	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLIENT SOLUTIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR ERIC HESS		Date of Receipt
Mailing Address 10 CARLTON RD		12 22 2007
City	State Zip Code	Transaction ID: INC.A.42653
FLANDERS	NJ 07836	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP ENGINEERING & OPS	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General  Other (specify) ▼	1300.00	
Full Name (Last, First, Middle Initial) MS JANE HILDEBRANDT		Date of Receipt
Mailing Address 35 CASCADE WAY		12 / 22 / Y Y Y Y Y Y 2007
City BUTLER	State Zip Code NJ 07405	Transaction ID: INC.A.42672  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR E-COM STRAT & DELIV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
CURTOTAL of Pagainte This Paga (antional		125.00

	LE A (FEC Form 3X)  O RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 194 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commer	n copied from such Reports and Scial purposes, other than using the COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO	HEALTH SOLUTIONS INC.	POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
MR STEPH	(Last, First, Middle Initial) EN HOBSON			Date of Receipt
	dress 1 HERITAGE RD			12 22 2007
City FLORHA	M DADI/	State NJ	Zip Code	Transaction ID: INC.A.42745
FEC ID nu	mber of contributing tical committee.	C	07932	Amount of Each Receipt this Period  50.00
Name of E	mployer EALTH SOLUTIONS	Occupation REGION	n IAL VP PHARMACIES	
Receipt Fo Prima Othe		Aggregate	e Year-to-Date ▼ 1300.00	
MR GLENN				Date of Receipt
Mailing Add	dress 974 HILLCREST ROA	AD.		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City		State	Zip Code	Transaction ID: INC.A.42821
RIDGEW		NJ	07450	Amount of Each Receipt this Period
federal poli	mber of contributing tical committee.	C		50.00
Name of E	mployer EALTH SOLUTIONS	Occupatio VP FACI		
Receipt Fo		Aggregate	e Year-to-Date ▼	_
	r (specify) ▼	0 0	840.00	
Full Name MR TIMOTI	(Last, First, Middle Initial) HY HOGAN			Date of Receipt
Mailing Add	dress 9 HIRLE ST			12 22 2007
City		State	Zip Code	Transaction ID: INC.A.42667
FEC ID nu	ALL ON HUDSON  mber of contributing tical committee.	C	12520	Amount of Each Receipt this Period  25.00
Name of E	mployer EALTH SOLUTIONS	Occupation	n CAL SPECIALIST	
Receipt Fo Prima Othe		<del>, '</del>	e Year-to-Date ▼ 650.00	
CURTOTAL	of Receipts This Page (optional)	1		125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 195 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any person he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ROGER HOLLAND Mailing Address 41 SAINT RAPHAEL City LAGUNA NIGUEL FEC ID number of contributing federal political committee.	State Zip Code CA 92677	Date of Receipt    1 2
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	Occupation VP SALES  Aggregate Year-to-Date ▼  1300.00	
Full Name (Last, First, Middle Initial) MR J. HOLLINGER Mailing Address 784 CAPE HENRY [	DR	Date of Receipt  1 2 2 2 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42749
COLUMBUS	OH 43228	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	4.17
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS PLANNING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 216.84	
Full Name (Last, First, Middle Initial) MR STEPHEN HOLODAK		Date of Receipt
Mailing Address 49 S HILLSIDE AVE		12 22 2007
City	State Zip Code	Transaction ID: INC.A.42771
ELMSFORD  FEC ID number of contributing federal political committee.	NY 10523	Amount of Each Receipt this Period  80.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INTERVENTION DELIVERY SYS	<del>-</del> Г
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2080.00	
SUBTOTAL of Receipts This Page (optional)	·	134.17

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 196 / 310 (check only one)    X
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۷.	Full Name (Last, First, Middle Initial) MS CYNTHIA HORN Mailing Address 9553 ANDREW DR			Date of Receipt
	Walling Address 9555 ANDREW DR			12 22 2007
	City TWINSBURG	State OH	Zip Code	Transaction ID: INC.A.42959
	FEC ID number of contributing federal political committee.	C	44087	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP CUS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 523.18	
 3.	Full Name (Last, First, Middle Initial) MR STEVEN HOROWITZ	1		Date of Receipt
	Mailing Address 30 AVENUE AT PORT IMPERIAL APT. 415			12 22 2007
	City	State	Zip Code	Transaction ID: INC.A.42943
	WEST NEW YORK	NJ	07093	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP BUSI	n NESS PLANNING	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼	0 0	1300.00	
_	Full Name (Last, First, Middle Initial) MR JEFFREY HULL			Date of Receipt
	Mailing Address 2616 S 3B'S & K RD			12 22 2007
	City	State	Zip Code	Transaction ID: INC.A.42750
	GALENA	OH	43021	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer MEDCO HEALTH SOLUTIONS		FESSIONAL PRACTICES	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 665.00	
		1		130.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 197 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	he name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS JANE HULSE Mailing Address 95 GORDON RD  City ESSEX FELLS  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07021	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	Occupation VP FINA Aggregate		
Full Name (Last, First, Middle Initial) MR DAVID ISRAEL Mailing Address 730 COLUMBUS AV  City NEW YORK  FEC ID number of contributing	State NY	Zip Code 10025	Date of Receipt    M M
rederal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼		n NESS DEV Year-to-Date ▼	50.00
Full Name (Last, First, Middle Initial) MS SUSAN ITO Mailing Address 6366 SW 90TH STR	EET		Date of Receipt  1 2 2 2 2 0 0 7
City  GAINESVILLE  FEC ID number of contributing federal political committee.	State FL	Zip Code 32608	Transaction ID: INC.A.42531  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del></del>	R CLINICAL SVCS  P Year-to-Date ▼  1300.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	<b>)</b>	150.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 198/310 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
,	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) MS TERESE JACKSON			Date of Receipt
	Mailing Address 6085 S. PRESTON LA	ANE		12 22 7 2007
	City NEW BERLIN	State WI	Zip Code 53151	Transaction ID: INC.A.42575  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30101	10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	on CCT EXEC	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
В.	Full Name (Last, First, Middle Initial) MR WILLIAM JACKSON Mailing Address 56 WARREN RD			Date of Receipt
	walling Address 56 WARREN RD			12 22 2007
	City WEST ORANGE	State NJ	Zip Code 07052	Transaction ID: INC.A.42857  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	01032	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC D	on IR MEDICARE OPS	
	Receipt For:  Primary General  Other (specify) ♥	Aggregate	e Year-to-Date ▼ 630.00	]
_ C.	Full Name (Last, First, Middle Initial) MR TODD JEFFREY			Date of Receipt
	Mailing Address 15 ELIZABETH STRE	ET		12 22 YYYY 12 22 2007
	City DUMONT	State NJ	Zip Code 07628	Transaction ID: INC.A.42870  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07028	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PHA	on RM CONTRACT & CONSUL	TING
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
	SUBTOTAL of Receipts This Page (optional) .			110.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate for each cate Detailed Sum	ory of the	FOR LINE NUMBER: PAGE 199 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	ne name and address of any politi	cal committee to so	for the purpose of soliciting contributions plicit contributions from such committee.
Full Name (Last, First, Middle Initial) ROBERT JINKS Mailing Address 22 PAGE AVE  City LYNDHURST  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07071  C  Occupation VP BUSINESS REQUIF Aggregate Year-to-Date		Date of Receipt    M
Full Name (Last, First, Middle Initial) MR WILLIAM JOEL Mailing Address 32 VENTOSA DR  City MORRISTOWN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07960  C  Occupation DIR ANALYTICAL SVC  Aggregate Year-to-Date	S 650.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTOI  City HENDERSON FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NV 89052  C  Occupation VP/GM  Aggregate Year-to-Date	863.52	Date of Receipt  M M M
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number			100.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 200 / 310 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any per g the name and address of any political committee	
` '	IC. POLITICAL ACTION COMMITTEE (a.k	.a. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MS KATHRYN JONSRUD  Mailing Address 16357 VICTORIA	OLIDVE CE	Date of Receipt
		12 22 2007
City PRIOR LAKE	State Zip Code MN 55372	Transaction ID: INC.A.42696  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIENT & MKT PROG STRAT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	
Full Name (Last, First, Middle Initial) MR JOHN KAPIOSKI		Date of Receipt
Mailing Address 8202 MARSH GLE	EN CT	12 22 2007
City TAMPA	State Zip Code FL 33647	Transaction ID: INC.A.42801
FEC ID number of contributing federal political committee.	FL 33647	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PHARMACY COMPLIANCE	<u> </u>
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MS BECKY KAUS		Date of Receipt
Mailing Address N81 W18359 TOU	IRS DR	1 2 2 2 2 2 0 0 7
City MENOMONEE FALLS	State Zip Code WI 53051	Transaction ID: INC.A.42683  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDGO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUPTOTAL of Possints This Page (astion	al)	110.00

SCHEDULE A (F ITEMIZED RECE	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 201 / 310 (check only one)    X
Any information copied fro or for commercial purpose  NAME OF COMMITTE	s, other than using the name and a	ay not be sold or used by any personderess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	SOLUTIONS INC. POLITICAL	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, MR WILLIAM KEELER Mailing Address 63	Middle Initial)  MOUNTAIN GLEN ROAD		Date of Receipt  1 2 2 2 2 0 0 7
City RINGWOOD	State NJ	Zip Code 07456	Transaction ID: INC.A.42891  Amount of Each Receipt this Period
FEC ID number of cont federal political commit			25.00
Name of Employer MEDCO HEALTH SOI	LUTIONS Occupati	on ICAL SPECIALIST	
Receipt For: Primary Other (specify)	General	te Year-to-Date ▼ 650.00	
Full Name (Last, First, MR WILLIAM KELLEY, II			Date of Receipt
			12 22 2007
City POWELL	State OH	Zip Code 43065	Transaction ID: INC.A.42739  Amount of Each Receipt this Period
FEC ID number of cont federal political commit	ributing	1 1 1 1 1	25.00
Name of Employer MEDCO HEALTH SOI	LUTIONS Occupati	on RAL MGR GROUP	
Receipt For: Primary Other (specify)	General	te Year-to-Date ▼ 725.00	
Full Name (Last, First, MR KEVIN KELLY	Middle Initial)		Date of Receipt
	POPLAR AVE		12 22 YYYY 12 22 2007
City <u>HACKENSACK</u>	State NJ	Zip Code 07601	Transaction ID: INC.A.42556
FEC ID number of cont federal political commit	ributing	07001	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOI	LUTIONS Occupati	on CLIENT SVC DELIVERY	
Receipt For: Primary Other (specify)	General	te Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts	This Page (optional)		75.00
TOTAL This Period (last	page this line number only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 202 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to IC. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR PETER KENNY Mailing Address 32 ADDISON DR  City FAIRFIELD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code NJ 07004  C Occupation	Date of Receipt    M M M
Receipt For:  Primary  General  Other (specify)	DIR ACCT MGMT  Aggregate Year-to-Date ▼  275.00	
Full Name (Last, First, Middle Initial) MS LISA KETNER Mailing Address 7 POINT VIEW		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: INC.A.42727
OAKLAND	NJ 07436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP MEMBER STRATEGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial)		Data of Danaira
MS KARIN KLEINEGGER  Mailing Address 121 CONKLING T	OWN ROAD	Date of Receipt  1 2 2 2 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42859
CHESTER  FEC ID number of contributing federal political committee.	NY 10918	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HLTH MGMT	7
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (option	nal)	125.00
TOTAL This Period (last page this line nu	mber only)	

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	(1)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 203 / 310 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) KENNETH KLEPPER			Date of Receipt
Mailing Address 295 GLEN PLACE			12 / 22 / 2007
City	State	Zip Code	Transaction ID: INC.A.42898
FRANKLIN LAKES	NJ	07417	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.30
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation PRES &	n CHIEF OPERATING OFFIC	ER
Receipt For:	Aggregate	Year-to-Date	
Primary General Other (specify) ▼	0 0	4999.80	]
Full Name (Last, First, Middle Initial) MR JON KLINE			Date of Receipt
Mailing Address 36 CORTLAND TL			12 22 YYYYY 12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42893
MAHWAH	NJ	07430	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.54
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS	n PLANNING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1314.04	
Full Name (Last, First, Middle Initial) MR BRADFORD KOGEN			Date of Receipt
Mailing Address 555 FORBUSH STF	REET		12 22 7 2007
City	State	Zip Code	Transaction ID: INC.A.42851
BOONTON	NJ	07005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n CLIENT RETAIL	
Receipt For:	Aggregate	Year-to-Date <b>V</b>	
Primary General Other (specify) ▼		540.00	
			267.84

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 204 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ne name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS KATHLEEN KORDUCKI Mailing Address 920 CLARK STREET  City BOWLING GREEN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code OH 43402  C  Occupation SR NATL ACCT EXEC  Aggregate Year-to-Date  1300.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MS JOANN KRENITSKY Mailing Address 143 DEERFIELD TEI  City MAHWAH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General		Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼  Full Name (Last, First, Middle Initial) MS BARBARA KRZAK  Mailing Address 495 ISLAND WAY  City FRANKLIN LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code NJ 07417  C  Occupation VP E-COM STRATEGY & DELIVERY Aggregate Year-to-Date	Date of Receipt  1 2 2 2 2 0 0 7  Transaction ID: INC.A.42780  Amount of Each Receipt this Period  55.00
Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	1430.00	130.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 205/310   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL F	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MICHAEL KRZAN			Date of Receipt
Mailing Address 2735 YORK RD			M M / D D / Y Y Y Y Y Y 1 1 2 2 2 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42833
COLUMBUS  FEC ID number of contributing federal political committee.	OH C	43221	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REGION	n AL VP PHARMACIES	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR MANOJ KUMAR			Date of Receipt
Mailing Address 7 SUNRISE WAY			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City TOWACO	State NJ	Zip Code 07082	Transaction ID: INC.A.42769
FEC ID number of contributing federal political committee.	C	07002	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT REQUIREMENTS	
Receipt For:  Primary General  Other (specify) ▼	<del></del> '	Year-to-Date ▼ 650.00	]
Full Name (Last, First, Middle Initial) MS CYNTHIA LAUBACHER			Date of Receipt
Mailing Address 7017 COBALT WAY	′		M M / D D / Y Y Y Y Y 1 Y 1 2 2 2 2 2 0 0 7
City CITRUS HEIGHTS	State CA	Zip Code 95621	Transaction ID: INC.A.42729
FEC ID number of contributing federal political committee.	C	33021	Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n GOVERNMENT AFFAIRS	
Receipt For:  Primary  General  Other (specify)	Aggregate	Year-to-Date ▼ 2950.00	
SUBTOTAL of Receipts This Page (optional	)		200.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each	parate schedule(s) a category of the I Summary Page	FOR LINE NUMBER: PAGE 206 / 310 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN			on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) JOSEPH LENZ Mailing Address 6 SHERMAN AVE			Date of Receipt  1 2 2 2 2 0 0 7
City	State Zip Co		Transaction ID: INC.A.42928
WALDWICK FEC ID number of contributing federal political committee.	NJ 07463	3	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	Occupation SR DIR MARKET Aggregate Year-to-Da		
Full Name (Last, First, Middle Initial)  MR ROBERT LONG  Mailing Address 18 HARLIND TERF	ACE	Date of Receipt  1 2 2 2 2 0 0 7	
City  RAMSEY  FEC ID number of contributing	State Zip Co		Transaction ID: INC.A.42720  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT E	XEC	50.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Da		
Full Name (Last, First, Middle Initial) MR ROSS LUCE			Date of Receipt
Mailing Address 1066 WEST GROV	E CT		12 22 2007
City GIBSONIA	State Zip Co		Transaction ID: INC.A.42622  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP OPS		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Da	780.00	
SUBTOTAL of Receipts This Page (optional	l)	<b>)</b>	90.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC FOITEMIZED RECEIPTS	rm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 207 / 310 (check only one)    X
or for commercial purposes, other the NAME OF COMMITTEE (In Full	an using the name and add	y not be sold or used by any persondress of any political committee to ACTION COMMITTEE (a.k.a	on for the purpose of soliciting contributions o solicit contributions from such committee.  a. Medco Health PAC)
Full Name (Last, First, Middle In MS DEBRA LUDGATE Mailing Address 238 WOOD  City SUMMIT  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ  C  Occupatio SR DIR I	Zip Code 07901 n MARKETING e Year-to-Date ▼	Date of Receipt    M M M
Full Name (Last, First, Middle In MS VERONA MACMAHON  Mailing Address 1504 WES UNIT G  City CHICAGO  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State IL  C  Occupation DIR ACC	Zip Code 60613 n cT MGMT e Year-to-Date ▼	Date of Receipt    M M M
Full Name (Last, First, Middle In MR MICHAEL MAHON Mailing Address 64 PHEAS/ City WEST HARTFORD FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS Receipt For: Primary General Other (specify)	State CT C Occupatio DIR SAL		Date of Receipt    M M M
SUBTOTAL of Receipts This Pag	(optional)		60.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 208 / 310 (check only one)    X
\ \ \	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	o solicit contributions from such committee.
7	Full Name (Last, First, Middle Initial)	OLITICAL /	ACTION COMMITTEE (a.K.a	t. Nieuco Realtii FAC)
Α.	MR KENNETH MALLEY  Mailing Address 764 W. SADDLE RIVE	R ROAD		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
	City	State	Zip Code	Transaction ID: INC.A.42655
	HO HO KUS	NJ	07423	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP PRO	n DUCT & CHANNEL MKTING	
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 1300.00	
- 3.	Full Name (Last, First, Middle Initial) MR MICHAEL MANDAGLIO			Date of Receipt
	Mailing Address 33 HICKORY TAVERN	12 22 2007		
	City	State	Zip Code	Transaction ID: INC.A.42533
	GILLETTE	NJ	07933	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FINA	NCE	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1300.00	
	Full Name (Last, First, Middle Initial) MS ILENE MARCUS			Date of Receipt
	Mailing Address 97 BLUEBERRY DR			12 22 2007
	City WOODCLIFF LAKE DR	State NJ	Zip Code 07675	Transaction ID: INC.A.42789  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07073	10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n FINANCE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
Γ	SUBTOTAL of Receipts This Page (optional)	·		110.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 209 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR GARY MARGIOTTA  Mailing Address 8 HEATHER HILL \  City  MENDHAM  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	`	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR JOSEPH MARINELLI Mailing Address 351 SOUND BEAC  City OLD GREENWICH  FEC ID number of contributing federal political committee.	H AVENUE  State Zip Code CT 06870	Date of Receipt    M M
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation DIR MEDICARE OPS  Aggregate Year-to-Date   650.00	
Full Name (Last, First, Middle Initial) MS TAMARA MARSHALL Mailing Address W144 N7150 TERF	RACE DRIVE	Date of Receipt  1 2 2 2 2 0 0 7
City  MENOMONEE FALLS  FEC ID number of contributing federal political committee.	State Zip Code WI 53051	Transaction ID: INC.A.42679  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SR NATL ACCT EXEC  Aggregate Year-to-Date   725.00	
SUBTOTAL of Receipts This Page (optional	ıl)	85.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	) <b>/</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 210 / 310   (check only one)		
Any information copied from such Reports or for commercial purposes, other than usir	and Statements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	NC. POLITICAL A	ACTION COMMITTEE (a.k.a	. Medco Health PAC)		
Full Name (Last, First, Middle Initial) MR TODD MARTIN			Date of Receipt		
	Mailing Address 11825 SHEPPARDS CROSSING				
City	State	Zip Code	1 2 2 2 2 0 0 7 Transaction ID: INC.A.42635		
CLARKSVILLE  FEC ID number of contributing federal political committee.	MD C	21029	Amount of Each Receipt this Period  192.30		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA				
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 4999.80			
Full Name (Last, First, Middle Initial) MR ROBERT MATCHETT			Date of Receipt		
Mailing Address 27 LAKEVILLE RI	)		12 22 YYYYY 12 22 2007		
City SUSSEX	State NJ	Zip Code 07461	Transaction ID: INC.A.42590  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	0.401	25.00		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR TEC	HNOLOGY			
Receipt For:  Primary General  Other (specify) ▼	<del>- ' '</del>	Year-to-Date ▼ 650.00			
Full Name (Last, First, Middle Initial) MR JEFFREY MAY			Date of Receipt		
Mailing Address 137 WASHINGTO	ON AVE		M M / D D / Y Y Y Y 1 1 2 2 2 2 2 0 0 7		
City HILLSDALE	State NJ	Zip Code	Transaction ID: INC.A.42824		
FEC ID number of contributing federal political committee.	C	07642	Amount of Each Receipt this Period  192.30		
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP DRU	JG DISTRIB & CONTROL			
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 4999.80			
SUBTOTAL of Receipts This Page (option	nal)		409.60		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 211 / 310 (check only one)    X
Any information copied from such Reports and Stor for commercial purposes, other than using the INAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. Po			
Full Name (Last, First, Middle Initial) MR TERENCE MAYTIN		TOTTOTT GOTTOTT TELE (united	Date of Receipt
Mailing Address 496 FRANKLIN AVE			12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42630
WYCKOFF	NJ	07481	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n E-COM STRAT & DELI	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) MS PATRICIA MAZZONE			Date of Receipt
Mailing Address 56 PENOBSCOT ST			12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42726
CLIFTON	NJ	07013	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n PRODUCT SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR SHAMUS MC GUIRE			Date of Receipt
Mailing Address 11 JARDINE COURT			12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42660
MORRIS PLAINS	NJ	07950	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP SALE	n ES AND MARKETING	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (optional)			85.00

TOTAL This Period (last page this line number only) .....

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 212 / 310 (check only one)    X
\ \ \	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. F	name and ad	dress of any political committee to	o solicit contributions from such committee.
∠ <b>.</b> .	Full Name (Last, First, Middle Initial) MR DOUG MCCANN		,	Date of Receipt
	Mailing Address 10201 E. 92ND STRE		7: On de	12 22 2007
	City OWASSO	State OK	Zip Code 74055	Transaction ID: INC.A.42945  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PRO	DDUCT DEVELOPMENT	
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 220.00	
- s.	Full Name (Last, First, Middle Initial) MR THOMAS MCDONALD Mailing Address 0-45 27TH ST	ı		Date of Receipt
				12 22 2007
	City FAIR LAWN	State NJ	Zip Code 07410	Transaction ID: INC.A.42772  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	07410	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR TEC	n CHNOLOGY	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 650.00	]
_	Full Name (Last, First, Middle Initial) MS COLLEEN MCINTOSH  Mailing Address 87 ROSELAWN RD			Date of Receipt  1 2 2 2 2 0 0 7
	City HIGHLAND MILLS	State NY	Zip Code 10930	Transaction ID: INC.A.42728  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10930	192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP & CC		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 4992.00	
	SUBTOTAL of Receipts This Page (optional)	1		242.00

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any pers the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR STEVEN MCNAMARA Mailing Address 112 GREEN TERR  City WEST MILFORD  FEC ID number of contributing federal political committee.  Name of Employer	ACE WAY  State Zip Code  NJ 07480  C	Date of Receipt    M M
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	SVP BUSINESS OPS  Aggregate Year-to-Date ▼  5000.00	]
Full Name (Last, First, Middle Initial) MS BARBARA MENZEL Mailing Address 921 AMARYLLIS A	VE	Date of Receipt  1 2
City	State Zip Code	Transaction ID: INC.A.42572
ORADELL FEC ID number of contributing federal political committee.	NJ 07649	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS PLANNING & ADMI	N
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼  650.00	
Full Name (Last, First, Middle Initial) DAVID MILLER		Date of Receipt
Mailing Address 7 CLOVER LANE		1 2 2 2 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42539
RANDOLPH FEC ID number of contributing federal political committee.	NJ 07869	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP LABOR RELATIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  725.00	
SUBTOTAL of Receipts This Page (optional	راد الاستان الم	267.25

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 214 / 310 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and addres	s of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS KAREN MILLER Mailing Address 34 MACKENZIE LAI  City DENVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	NE NORTH  State NJ  C  Occupation SR DIR FIN.  Aggregate Ye.		Date of Receipt  1 2 2 2 2 0 0 7  Transaction ID: INC.A.42532  Amount of Each Receipt this Period  30.00
Primary General Other (specify)  Full Name (Last, First, Middle Initial) MR GIOVANNI MINARDI		780.00	Date of Receipt
Mailing Address 12 LINCOLN ROAD  City  KINNELON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	State NJ C Occupation	Zip Code 07405  OM STRAT & DELI ar-to-Date ▼ 650.00	Transaction ID: INC.A.42881  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MR BHUPESH MISTRY Mailing Address 106 HAMBURG RO  City PARSIPPANY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ C Occupation	Zip Code 07054  _ SPECIALIST ar-to-Date ▼ 650.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional	)		80.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	atamanta ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 215 / 310 (check only one)    X
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
<b>A.</b>	Full Name (Last, First, Middle Initial) MS JULIANA MOLEK Mailing Address 17584 WEXFORD DR			Date of Receipt  1 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.42642
	EDEN PRAIRIE FEC ID number of contributing	MN	55347	Amount of Each Receipt this Period
	federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	on SPECIAL MARKETS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 575.00	
В.	Full Name (Last, First, Middle Initial) MR PETER MONKHOUSE			Date of Receipt
	Mailing Address 1320 BRONCO CIR	12 22 2007		
	City	State	Zip Code	Transaction ID: INC.A.42652
	WARRINGTON	PA	18976	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		BENEFIT DELIVERY SYS	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify) ▼	0 0	650.00	
C.	Full Name (Last, First, Middle Initial) MR THOMAS MORIARTY			Date of Receipt
	Mailing Address 86 WELLINGTON AVE	NUE		12 22 2007
	City	State	Zip Code	Transaction ID: INC.A.42522
	SHORT HILLS FEC ID number of contributing	NJ	07078	Amount of Each Receipt this Period
	federal political committee.	С		192.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP PH	on ARMACEUTICAL CONTRAC	et ng
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		4992.00	
	SUBTOTAL of Receipts This Page (optional)			242.00
	TOTAL This Period (last page this line number of		<u> </u>	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 216 / 310 (check only one)    X   11a	
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may e name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.	
	MEDCO HEALTH SOLUTIONS INC. F	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)	
۱.	Full Name (Last, First, Middle Initial)  MS THERESA MORMILE  Mailing Address 59 VALLEY VIEW TER	₹		Date of Receipt	
	City MONTVALE	State NJ	Zip Code 07645	Transaction ID: INC.A.42825  Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	0.0.0	50.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP FINAL	NCE		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00		
_	Full Name (Last, First, Middle Initial) MR RICHARD MOUNTJOY Mailing Address 2 STONEBRIDGE RD	1		Date of Receipt	
	City	1 2 2 2 2 0 0 7  Transaction ID: INC.A.42860			
	SPARTA	NJ	07871	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		20.00	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL	n - ACCT EXEC		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 520.00		
_	Full Name (Last, First, Middle Initial) MR KEVIN MURPHY, JR			Date of Receipt	
	Mailing Address 80 PARKWAY			12 22 2007	
	City FAIRFIELD	State CT	Zip Code 06824	Transaction ID: INC.A.42577  Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		192.30	
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP MAR	n RKET STRATEGY AND DEV	V	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 3451.90		
Г		1		262.30	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate s for each catego Detailed Summ	chedule(s) ory of the	FOR LINE NUMBER: PAGE 217/310 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P			for the purpose of soliciting contributions olicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS BECKY NAGLE  Mailing Address 64 WALTER AVE			Date of Receipt
City  HASBROUCK HEIGHTS  FEC ID number of contributing	State Zip Code NJ 07604	1	1 2 2 2 2 0 0 7  Transaction ID: INC.A.42578  Amount of Each Receipt this Period
Receipt For:	Occupation SR DIR CLINICAL SVCS Aggregate Year-to-Date	5	25.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MS ARLENE NELSON		650.00	Date of Receipt
Mailing Address 17 GARFIELD PLACE  City  RIDGEWOOD  FEC ID number of contributing federal political committee.	State Zip Code NJ 07450		Transaction ID: INC.A.42608  Amount of Each Receipt this Period
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP FINANCE Aggregate Year-to-Date	700.00	
Full Name (Last, First, Middle Initial) MR MICHAEL NICODEMO Mailing Address 407 MEER AVE			Date of Receipt
City WYCKOFF	State Zip Code NJ 07481		1 2 2 2 2 0 0 7  Transaction ID: INC.A.42865  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-COM STRATEGY	& DELIVERY	10.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	260.00	
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	85.00

ITEMIZED RECEIPTS	Use separate schedu for each category of t Detailed Summary Pa	he (check only one)
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	he name and address of any political com	any person for the purpose of soliciting contributions imittee to solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC  Full Name (Last, First, Middle Initial)	POLITICAL ACTION COMMITTE	E (a.k.a. Medco Health PAC)
MS JANINE NOWATZKY  Mailing Address 24 CHEROKEE TRA	ılL	Date of Receipt
City OAKLAND	State Zip Code NJ 07436	Transaction ID: INC.A.42719  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR MKTING & STRATEGIC	ANAL
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
Full Name (Last, First, Middle Initial) MS COLLEEN O'BRIEN		Date of Receipt
Mailing Address 30 BELCHER ROAD		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WARWICK	State Zip Code NY 10990	Transaction ID: INC.A.42733  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHARM OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
Full Name (Last, First, Middle Initial) MR CHARLES OESTREICHER		Date of Receipt
Mailing Address 6 PARK DR SOUTH		12 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RYE	State Zip Code NY 10580	Transaction ID: INC.A.42848  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-COM STRATEGY & DE	LIVERY
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	0.00
		85.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 219 / 310 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	the name and ado	lress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR SUNNY OGBONDA  Mailing Address 79 LAUREL WOOI  City	State	Zip Code	Date of Receipt  1 2 2 2 2 0 0 7  Transaction ID: INC.A.42546
ROCKAWAY TOWNSHIP  FEC ID number of contributing federal political committee.	NJ C	07866	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del>- ' '</del>	INESS REQUIREMENTS Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) MR MELVIN OHL Mailing Address 274 E FRANKLIN	ГРКЕ		Date of Receipt    M
City	State	Zip Code	Transaction ID: INC.A.42798
RIDGEWOOD  FEC ID number of contributing federal political committee.	C	07450	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General		CUREMENT & INVENTORY Year-to-Date ▼	1
Other (specify) ▼  Full Name (Last, First, Middle Initial)	0 0	1300.00	Date ( Decide
MS CLAUDINE OLSEN  Mailing Address 4 HIGHGATE CT			Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City SUFFERN	State NY	Zip Code 10901	Transaction ID: INC.A.42841
FEC ID number of contributing federal political committee.	C	10901	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS		ACCT MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional	al)		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 220 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	Statements may not be sold or used by any pe e name and address of any political committee POLITICAL ACTION COMMITTEE (a.I	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) ALEXANDER ONIK Mailing Address 1 SCHINDLER CT  City UPPER SADDLE RIVER FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code NJ 07458  C  Occupation TECHNICAL SPECIALIST Aggregate Year-to-Date	Date of Receipt    M M M
Other (specify)  Full Name (Last, First, Middle Initial) MS NATALYA ONIK Mailing Address 1 SCHINDLER CT City	State Zip Code	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
UPPER SADDLE RIVER  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	Occupation DIR TECHNOLOGY Aggregate Year-to-Date  650.00	Transaction ID: INC.A.42703  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS LUDIVINA PACAMARRA Mailing Address 4 TEAK COURT  City RINGWOOD  FEC ID number of contributing federal political committee.	State Zip Code NJ 07456	Date of Receipt    M M
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation EXEC DIR TECHNOLOGY Aggregate Year-to-Date  1300.00	
SUBTOTAL of Receipts This Page (optional) .		100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	ν)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 221 / 310   (check only one)     X
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS DAWN PAGANO			Date of Receipt
Mailing Address 185 PASCACK ROA	AD		M M / D D / Y Y Y Y Y 1 1 2 2 2 2 2 0 0 7
City PARK RIDGE	State NJ	Zip Code 07656	Transaction ID: INC.A.42785  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07030	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GROUP		
Receipt For:  Primary  General  Other (specify) ▼	<del>'</del>	Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR RICHARD PAGANO			Date of Receipt
Mailing Address 185 PASCACK RD			M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City PARK RIDGE	State NJ	Zip Code 07656	Transaction ID: INC.A.42781  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07030	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation	n BUSINESS REQUIREMENT	
Receipt For:  Primary General  Other (specify) ▼	<del></del>	e Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MRS MICHELE PAIGE			Date of Receipt
Mailing Address 12 MILLBROOK CC	DURT		M M / D D / Y Y Y Y Y 1 1 2 2 2 2 0 0 7
City LIVINGSTON	State NJ	Zip Code 07039	Transaction ID: INC.A.42698
FEC ID number of contributing federal political committee.	C	07039	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR N	n MARKET STRATEGY	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optiona	l)	<b>\</b>	100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 222 / 310 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR RICHARD PALOMBO			Date of Receipt
Mailing Address 19 E. HOLLYWOOD LA	ANE		12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42895
BEESLEY'S POINT	NJ	08223	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		9.61
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	n DFESSIONAL PRACTICES	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	249.86	
Full Name (Last, First, Middle Initial) MR JAY PATEL			Date of Receipt
Mailing Address 14 BROWNSTONE TE	RRACE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.42920
<u>HAWTHORNE</u>	NJ	07506	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR E-C	n OM STRAT & DELIV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR MATTHEW PATELLA			Date of Receipt
Mailing Address 30 TAM O SHANTER [	DRIVE		12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42563
MAHWAH	NJ	07430	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATI	n _ ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional)		<b>)</b>	44.61

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 223 / 310 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ROBERT PELLEGRINI Mailing Address 211 WILTSIE COL	JRT	Date of Receipt
City WYCKOFF FEC ID number of contributing	State Zip Code NJ 07481	Transaction ID: INC.A.42663  Amount of Each Receipt this Period  20.00
Receipt For:  Primary  Other (specify) ▼	Occupation VP INFO TECHNOLOGY  Aggregate Year-to-Date ▼  340.00	1
Full Name (Last, First, Middle Initial) MR MICHAEL PETEROY Mailing Address 4769 STAVANGER	R LANE	Date of Receipt  1 2 2 2 2 0 0 7
City LAS VEGAS	State Zip Code NV 89147	Transaction ID: INC.A.42767  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS Receipt For:	Occupation DIR PRODUCT DEVELOPMENT	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR NATHAN PETERSON Mailing Address 1771 PRESCOTT	LANE	Date of Receipt
		12 22 2007
City CHASKA	State Zip Code MN 55318	Transaction ID: INC.A.42675  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (ontion	al)	70.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 224 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16
NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any personal the name and address of any political committee to the name and address of the name	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR THOMAS PETTYES	C. POLITICAL ACTION COMMITTEE (a.k.	Date of Receipt
Mailing Address 8522 UPLAND LN N  City  MAPLE GROVE	NORTH State Zip Code MN 55311	Transaction ID: INC.A.42629  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	Occupation GENERAL MGR GROUP  Aggregate Year-to-Date   1300.00	
Full Name (Last, First, Middle Initial) MS JUDITH PLATKIN Mailing Address 29 BLACKWELL AV	VE	Date of Receipt  1 2 2 2 2 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42534
MORRISTOWN	NJ 07960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERAL MGR	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2200.00	
Full Name (Last, First, Middle Initial) MS JANET PORAT		Date of Receipt
Mailing Address 5 CRABAPPLE CT		1 2 2 2 2 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42633
MONSEY  FEC ID number of contributing federal political committee.	NY 10952	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BUSINESS REQUIREMENTS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optiona	l)	275.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 225 / 310 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. I	Statements may not be sold or used by any perse name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS LYDIA POTTER  Mailing Address 19642 S.W. 88 LOOP  City DUNNELLON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code FL 34432  C  Occupation DIR OPS  Aggregate Year-to-Date ▼  650.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) MR NEIL PREZIOSO Mailing Address 10258 WINDSOR WA  City POWELL FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General		Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MS KARIN PRINCIVALLE Mailing Address 875 ALEXANDRIA CT  City RAMSEY  FEC ID number of contributing federal political committee.		Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 2 2 2 0 0 7  Transaction ID: INC.A.42712  Amount of Each Receipt this Period  192.30
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation SVP HR  Aggregate Year-to-Date ▼  4999.80	]
SUBTOTAL of Receipts This Page (optional)		267.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 226 / 310 (check only one)    X   11a
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR ROBERT PRITCHET Mailing Address 135 HOLLYBERRY D  City HOPEWELL JUNCTION FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State Zip Code NY 12533  C  Occupation SR DIR CONTRACT ADMINISTRAT Aggregate Year-to-Date	Date of Receipt    M M M
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR MARK PROULX  Mailing Address 20 BRANDY RIDGE I	650.00 ROAD	Date of Receipt  1 2 2 2 2 0 0 7
City SPARTA FEC ID number of contributing federal political committee.	State Zip Code NJ 07871	Transaction ID: INC.A.42886  Amount of Each Receipt this Period  192.25
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation SVP PHARMACY & CUST SVC OPS Aggregate Year-to-Date ▼  5000.00	8
Full Name (Last, First, Middle Initial) SYED QUADRI  Mailing Address 6040 KENNEDY BLV APT 30N	D EAST	Date of Receipt  1 2 2 2 2 0 0 7
City WEST NEW YORK FEC ID number of contributing	State Zip Code NJ 07093	Transaction ID: INC.A.42880  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRIVACY	25.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)		242.25

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 227 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than usin  NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person githe name and address of any political committee to IC. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR GILBERT RAINES  Mailing Address 800 SANDY TRAIL  City  KELLER  FEC ID number of contributing federal political committee.  Name of Employer  MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify)	State Zip Code TX 76248  C  Occupation DIR HR  Aggregate Year-to-Date   610.00	Date of Receipt  M M / D D / Y Y Y Y Y  1 2 2 2 2 2 0 0 7  Transaction ID: INC.A.42905  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial)  MS FRANCES RAO  Mailing Address 19 ROSS ROAD  City  SCARSDALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NY 10583  C  Occupation SR DIR PRIVACY Aggregate Year-to-Date   650.00	Date of Receipt  M M / D D / Y Y Y Y Y  1 2 2 2 2 2 0 0 7  Transaction ID: INC.A.42558  Amount of Each Receipt this Period  25.00
Full Name (Last, First, Middle Initial) MS JOANN REED  Mailing Address 4 ANTLER CT  City  MATAWAN  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NJ 07747  C  Occupation SVP FINANCE & CHIEF FIN OFFCR  Aggregate Year-to-Date   5000.00	Date of Receipt  M M / D D / Y Y Y Y Y  1 2 2 2 0 0 7  Transaction ID: INC.A.42806  Amount of Each Receipt this Period  65.38
SUBTOTAL of Receipts This Page (option	al)	115.38

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>K</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 228 / 310 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MRS MONICA REED  Mailing Address 8475 DUNHAM ST	ATION DRIVE		Date of Receipt
City TAMPA FEC ID number of contributing	State FL	Zip Code 33647	Transaction ID: INC.A.42709  Amount of Each Receipt this Period  25.00
Receipt For:  Primary  Other (specify) ▼	Occupation DIR PHA	n.RM PRACTICE  Year-to-Date   1300.00	
Full Name (Last, First, Middle Initial) MR THOMAS REINCKENS Mailing Address 22 BARTLETT AVE	<u> </u>		Date of Receipt  1 2 2 2 2 0 0 7
City NORWALK	State CT	Zip Code 06850	Transaction ID: INC.A.42650  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R RECONCILIATION	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR VICTOR RENNA			Date of Receipt
Mailing Address 8 CARLA ANN CT			12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City FLANDERS	State NJ	Zip Code 07836	Transaction ID: INC.A.42852  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP PRO	n CUREMENT & INVENTORY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (optional	al)		125.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	(Crieck only one)
or for commercial purposes, other than usin	and Statements may not be sold or used by an g the name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.  (a.k.a. Medco Health PAC)
Full Name (Last, First, Middle Initial)  MR JOSEPH REYNOLDS  Mailing Address 412 RIVER MEWS	S LANE	Date of Receipt
City EDGEWATER FEC ID number of contributing	State Zip Code NJ 07020	Transaction ID: INC.A.42902  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General Other (specify) ▼	Occupation EXEC DIR TECHNOLOGY  Aggregate Year-to-Date ▼	70.00
Full Name (Last, First, Middle Initial) MR DAVID ROBARGE Mailing Address 4565 QUEENSLA	ND LN N	Date of Receipt    M
City	State Zip Code	Transaction ID: INC.A.42589
MINNEAPOLIS  FEC ID number of contributing federal political committee.	MN 55446	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.0	00
Full Name (Last, First, Middle Initial) MS SORAYA RODRIGUEZ-BALZAC		Date of Receipt
Mailing Address 22 PAPOOSE TR.	AIL	12 22 7 2007
City ANDOVER	State Zip Code NJ 07821	Transaction ID: INC.A.42901  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PUBLIC AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.0	00
SUBTOTAL of Receipts This Page (option	nal)	120.00

# SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 230 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using t	I Statements may not be sold or used by any personal he name and address of any political committee to a POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MICHAEL ROMANZO Mailing Address 96 LEHMANN STRE  City MAHWAH  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code NJ 07430  C  Occupation PRESIDENT SYSTEMED  Aggregate Year-to-Date	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Other (specify) ▼  Full Name (Last, First, Middle Initial)  MS DONNA ROSEN  Mailing Address 7 RED OAK LANE  City	State Zip Code	Date of Receipt  1 2 2 2 2 0 0 7  Transaction ID: INC.A.42818
KINNELON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation VP OPS-CLINICAL TECH Aggregate Year-to-Date   1300.00	Amount of Each Receipt this Period  50.00
Full Name (Last, First, Middle Initial) MR CHRISTOPHERJOHN ROWLAND Mailing Address 16725 OLIVE CIRCL City FOUNTAIN VALLEY FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	State Zip Code CA 92708  C  Occupation NATL ACCT EXEC	Date of Receipt    M
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line numb	·	252.30

SCHEDULE A (FEC FITEMIZED RECEIPTS	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 231 / 310   (check only one)
Any information copied from such or for commercial purposes, other	Reports and Statements may than using the name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In F	,	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle MR RICHARD RUBINO	Initial)		Date of Receipt
Mailing Address 5201 RIO	VISTA DRIVE		12 22 2007
City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC.A.42814
FEC ID number of contributing federal political committee.		07430	Amount of Each Receipt this Period  175.00
Name of Employer MEDCO HEALTH SOLUTION	Occupation SVP & C	n ONTROLLER	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle MR STEVEN RUSSEK	Initial)		Date of Receipt
Mailing Address 21 SKY T	OP RIDGE		12 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City OAKLAND	State NJ	Zip Code 07436	Transaction ID: INC.A.42665  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		07430	50.00
Name of Employer MEDCO HEALTH SOLUTION	Occupation VP FORM	n MULARY & COVERAGE MO	— ∃MT
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle MR ANTHONY RUSSO	Initial)		Date of Receipt
Mailing Address 66 FINCH	RD		1 2 2 2 2 0 0 7
City RINGWOOD	State NJ	Zip Code 07456	Transaction ID: INC.A.42762
FEC ID number of contributing federal political committee.		0/436	Amount of Each Receipt this Period  20.00
Name of Employer MEDCO HEALTH SOLUTION	Occupation VP PROI		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 520.00	
SUBTOTAL of Receipts This Pa	I age (optional)		245.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 232 / 310 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and addr	ess of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS MARY RYAN  Mailing Address 456 RICHMOND A			Date of Receipt  1 2 D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  MAPLEWOOD  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07040	Transaction ID: INC.A.42805  Amount of Each Receipt this Period  78.34
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	<del> </del>	MACY REGULATORY  Year-to-Date ▼  2036.84	
Full Name (Last, First, Middle Initial) MISS CYNTHIA RYLANDS Mailing Address 4836 MIDDLE RD	<b>-</b>		Date of Receipt  1 2 2 2 2 0 0 7
City ALLISON PARK FEC ID number of contributing	State PA	Zip Code 15101	Transaction ID: INC.A.42834  Amount of Each Receipt this Period
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	- <del>  '</del>	NESS REQUIREMENTS Year-to-Date ▼ 650.00	25.00
Full Name (Last, First, Middle Initial) MR MICHAEL SARDONE Mailing Address 7 AHERN WAY	•		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City WEST ORANGE  FEC ID number of contributing federal political committee.	State NJ	Zip Code 07052	Transaction ID: INC.A.42693  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR CI	LINICAL THERAPEUTICS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (options	al)		128.34

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 233 / 310 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	
` ′	. POLITICAL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MATTHEW SARDY		Date of Receipt
Mailing Address 230 FAIRFIELD AVE	State Zip Code	1 2 2 2 2 0 0 7  Transaction ID: INC.A.42593
RIDGEWOOD	NJ 07450	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR BUS PLANNING & ADMIN	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MS BETH SAVARE		Date of Receipt
Mailing Address 27 JONES LN		12 22 2007
City	State Zip Code	Transaction ID: INC.A.42810
BLAIRSTOWN FEC ID number of contributing federal political committee.	NJ 07825	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PHARM OPS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
MS TRINA SAYLER  Mailing Address 56 LAKESIDE DRIV	E	1 2 2 2 2 0 0 7
City RAMSEY	State Zip Code NJ 07446	Transaction ID: INC.A.42867  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	
SUBTOTAL of Receipts This Page (optional)		65.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 234 / 310 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. F	POLITICAL	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR DAVID SCHLETT			Date of Receipt
Mailing Address 339 GRAMERCY PL			12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42813
GLEN ROCK	NJ	07452	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP ANAI	n _YTICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR FRANK SCHULTE			Date of Receipt
Mailing Address 2121 AMERICA'S CUP	CIR		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.42644
LAS VEGAS	NV	89117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio REGION	n IAL VP PHARMACIES	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MR ALLEN SCHWARTZ			Date of Receipt
Mailing Address 3556 DAVIS			12 22 7 2007
City	State	Zip Code	Transaction ID: INC.A.42585
EVANSTON	IL	60203	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio EXEC DI	n IR CLINICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1080.00	
SUBTOTAL of Receipts This Page (optional)			125.00

# SCHEDULE A (FEC Form 3X)

	for each category of the Detailed Summary Page	(check only one)    X   11a
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personal the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of any political committee of the name and address of the name and add	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS CYNTHIA SCOTT Mailing Address 18650 BEARPATH  City EDEN PRAIRIE  FEC ID number of contributing federal political committee.	State Zip Code MN 55437	Date of Receipt  1 2
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	Occupation VP CLINICAL PROG DEV  Aggregate Year-to-Date   1300.00	
Full Name (Last, First, Middle Initial) MR JEFFREY SCOTT Mailing Address 7330 EVEREST LA	NE - NORTH	Date of Receipt  1 2 2 2 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42854
MAPLE GROVE  FEC ID number of contributing federal political committee.	MN 55311	Amount of Each Receipt this Period 50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR NATL ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name (Last, First, Middle Initial) MR LEONARD SCOTT Mailing Address 13514 MOTTLEST	ONE DRIVE NW	Date of Receipt  1 2 2 2 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42740
PICKERINGTON  FEC ID number of contributing federal political committee.	OH 43147	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation REG DIR ACCT MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional	l)	125.00

# SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 236 / 310 (check only one)    X   11a
or for commercial purposes, other than to NAME OF COMMITTEE (In Full)	ts and Statements may not be sold or used by any persusing the name and address of any political committee is INC. POLITICAL ACTION COMMITTEE (a.k.	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS MONICA SCOZZARE Mailing Address 3021 E MILLCF  City SALT LAKE CITY  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State Zip Code UT 84109  C  Occupation EXEC DIR CLINICAL SVCS	Date of Receipt  1 2
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 1300.00	
MR ROBERT SENDEWICZ  Mailing Address 1220 CROSSIN  City  WAYNE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code NJ 07470  C  Occupation SR DIR TECHNOLOGY  Aggregate Year-to-Date   650.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) MR GEORGE SERPIKOV Mailing Address 66 PROSPECT  City WESTWOOD  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07675  C  Occupation VP BUSINESS DEV  Aggregate Year-to-Date   1300.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
SUBTOTAL of Receipts This Page (op	tional)	125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 237 / 310 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	g the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR THOMAS SHANAHAN, III  Mailing Address 266 BRUSHY CRE	EK AVE		Date of Receipt
City LAS VEGAS	State NV	Zip Code 89148	1 2 2 2 2 0 0 7  Transaction ID: INC.A.42725  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation		45.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼	DIR OPS		
Full Name (Last, First, Middle Initial) MR JOHN SHEA Mailing Address 62 FRANKLIN TUF	RNPIKE		Date of Receipt  1 2 2 2 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42544
ALLENDALE  FEC ID number of contributing federal political committee.	NJ C	07401	Amount of Each Receipt this Period 40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST CC	DUNSEL	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1040.00	
Full Name (Last, First, Middle Initial) MR FRANK SHEEHY			Date of Receipt
Mailing Address 119 HAMILTON RI	J		12 22 2007
City RIDGEWOOD	State <b>NJ</b>	Zip Code 07450	Transaction ID: INC.A.42601  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07450	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation GENERA		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 2600.00	
SUBTOTAL of Receipts This Page (optional	al)		135.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 238 / 310 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any persong the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.)	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  ALEXANDER SHEKHDAR  Mailing Address 211 CROYDON AV	/ENUE	Date of Receipt
City ROCKVILLE FEC ID number of contributing federal political committee.	State Zip Code MD 20850	Transaction ID: INC.A.42948  Amount of Each Receipt this Period  15.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation DIR BUSINESS & MKT DEV Aggregate Year-to-Date  240.00	
Full Name (Last, First, Middle Initial) MR PETER SHERMAN Mailing Address 139 GATES AVEN	UE	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City  MONTCLAIR  FEC ID number of contributing federal political committee.	State Zip Code NJ 07042	Transaction ID: INC.A.42523  Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	Occupation MANAGING COUNSEL Aggregate Year-to-Date  1300.00	
Full Name (Last, First, Middle Initial) MR JAMES SHIVAS Mailing Address 18 PROSPECT AV	/E	Date of Receipt
City NORTH ARLINGTON FEC ID number of contributing federal political committee.	State Zip Code NJ 07031	Transaction ID: INC.A.42689  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation DIR PRICING  Aggregate Year-to-Date   650.00	
SUBTOTAL of Receipts This Page (options	al)	90.00

ITEN Any in	EDULE A (FEC Form 3X)  MIZED RECEIPTS  formation copied from such Reports and State	tements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 239 / 310 (check only one)    X
or for o	commercial purposes, other than using the name of COMMITTEE (In Full) EDCO HEALTH SOLUTIONS INC. PC	ame and add	dress of any political committee to	solicit contributions from such committee.
<b>A.</b> MF	I Name (Last, First, Middle Initial) ELWOOD SIDES III Illing Address 150 CLAREMONT AVE			Date of Receipt
	IIIII Address 150 CLAREMONT AVE			12 22 2007
City		State	Zip Code	Transaction ID: INC.A.42615
FE	ONG BEACH C ID number of contributing eral political committee.	CA	90803	Amount of Each Receipt this Period  25.00
Na ME	me of Employer DCO HEALTH SOLUTIONS	Occupation VP SALE		
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
<b>B.</b> MS	I Name (Last, First, Middle Initial) ANNE SIGILLITO iling Address 178 LEXINGTON AVE.			Date of Receipt
City		State NJ	Zip Code 07675	Transaction ID: INC.A.42527  Amount of Each Receipt this Period
FE	C ID number of contributing eral political committee.	C		10.00
Na ME	me of Employer EDCO HEALTH SOLUTIONS	Occupation SR DIR (	n GENERIC STRAT & CUST D	v
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
	I Name (Last, First, Middle Initial) JODI SILBERMANN			Date of Receipt
Ma	iling Address 16 TULIP LANE			1 2 2 2 2 0 0 7
City RA	y ANDOLPH	State NJ	Zip Code 07869	Transaction ID: INC.A.42826  Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		10.00
	me of Employer EDCO HEALTH SOLUTIONS	Occupation SR DIR F	n FINANCE	
Re	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
SUBT	TOTAL of Receipts This Page (optional)		·····	45.00

Mailing Address 704 SAW PALMETTO COURT	SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 240 / 310 (check only one)    X   11a
MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)    Full Name (Last, First, Middle Initial)   JEFFREY SIME	or for commercial purposes, other	er than using the name and ac	ay not be sold or used by any persiddress of any political committee to	on for the purpose of soliciting contributions
Date of Receipt    Date of Receipt   Date of Re	1 \	•	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
City State Zip Code PORT ORANGE FL 32128  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS   Cocupation VP CORP COMMUNICATIONS   Primary General Other (specify) ▼   State Zip Code NORTHBROOK   IL 60062   State Size City Code NORTHBROOK   IL 60062   State Size City Code NEALTH SOLUTIONS   Occupation Centributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS   Occupation Centributing federal political committee.   Occupation Cen	JEFFREY SIMEK	,		<u> </u>
FEC ID number of contributing federal political committee.    Post   Primary   Primar			Zin Code	12 22 2007
FEC ID number of contributing federal political committee.  Name of Employer MECOC HEALTH SOLUTIONS  Receipt For:	-		·	
Receipt For:	FEC ID number of contributir	C C		
Primary General Other (specify) ▼ 5000.00    Pull Name (Last, First, Middle Initial)   MR LEE SIMON   Mailing Address 2390 GREENVIEW ROAD   Date of Receipt   M M M M M M M M M M M M M M M M M M	Name of Employer MEDCO HEALTH SOLUTION	Occupation VP COF		
MR LEE SIMON Mailing Address 2390 GREENVIEW ROAD  City State Zip Code NORTHBROOK IL 60062  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  GENERAL MGR GROUP  Receipt For:  Other (specify) ▼  State Zip Code  Aggregate Year-to-Date ▼  Primary General  City State Zip Code  Mailing Address 10 CHERRY TREE LANE  City State Zip Code  KINNELON  NJ 07405  FEC ID number of contributing federal political committee.  City State Zip Code  NJ 07405  FEC ID number of contributing federal political committee.  City State Zip Code  NJ 07405  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  NJ 07405  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  Page 22 / 2 0 0 7  Transaction ID: INC. A 42735  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Substitute The Solution of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Substitute This Page (optional)	Primary Gene	I	5000.00	
City NORTHBROOK    L   60062	MR LEE SIMON			Date of Receipt
NORTHBROOK  IL 60062  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Pull Name (Last, First, Middle Initial)  MR JEFFREY SINKO  Mailing Address 10 CHERRY TREE LANE  City State Zip Code NJ 07405  KINNELON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Occupation  VP & COUNSEL  Receipt For:  Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Transaction ID: INC.A.42735  Amount of Each Receipt this Period  Amount of Each Receipt this Period  1300.00	Mailing Address 2390 GF	REENVIEW ROAD		
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	•	State	Zip Code	Transaction ID: INC.A.42861
Name of Employer   MEDCO HEALTH SOLUTIONS   GENERAL MGR GROUP			60062	Amount of Each Receipt this Period
Receipt For:		C		50.00
Primary General Other (specify) ▼ 1300.00  Full Name (Last, First, Middle Initial) MR JEFFREY SINKO  Mailing Address 10 CHERRY TREE LANE  City State Zip Code NJ 07405  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼ 1300.00  SUBTOTAL of Receipts This Page (optional)	Name of Employer MEDCO HEALTH SOLUTION	Occupation Occupation GENER		
MR JEFFREY SINKO  Mailing Address 10 CHERRY TREE LANE  City State Zip Code KINNELON NJ 07405  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	Primary Gene			
City  KINNELON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  PSTATE A State Zip Code  Transaction ID: INC.A.42735  Amount of Each Receipt this Period  50.00  12 22 2007  Transaction ID: INC.A.42735  Amount of Each Receipt this Period  50.00		e Initial)		Date of Receipt
KINNELON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  Amount of Each Receipt this Period  50.00  Amount of Each Receipt this Period  50.00  1300.00	Mailing Address 10 CHEF	RRY TREE LANE		
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)  Other (specify)  1300.00  SUBTOTAL of Receipts This Page (optional)			•	
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  SUBTOTAL of Receipts This Page (optional)			07405	Amount of Each Receipt this Period
MEDCO HEALTH SOLUTIONS  VP & COUNSEL  Receipt For: Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  292.25	federal political committee.			50.00
Primary General Other (specify) ▼ 1300.00  SUBTOTAL of Receipts This Page (optional)   292.25		VP & CO	DUNSEL	
SUBTOTAL of Receipts This Page (optional)	Primary Gene			7
SUBTOTAL of neceipts Tills Fage (optional)	☐ Other (specify) ▼		1300.00	_
	SUBTOTAL of Receipts This F	Page (optional)		292.25
TOTAL This Period (last page this line number only)			<u> </u>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 241 / 310 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR WILLIAM SIRICO Mailing Address 564 DALE COUR	TEACT	Date of Receipt
City RIVER VALE	State Zip Code NJ 07675	1 2 2 2 2 0 0 7  Transaction ID: INC.A.42559  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	Occupation SR DIR TECHNOLOGY  Aggregate Year-to-Date ▼  780.00	
Full Name (Last, First, Middle Initial) MR DAVID SITVER Mailing Address 24 YORKSHIRE	AVE	Date of Receipt  1 2 2 2 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42688
SUFFERN	NY 10901	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) ANN SMITH	·	Date of Receipt
Mailing Address 437 GLENDALE	RD	12 22 2007
City	State Zip Code	Transaction ID: INC.A.42691
WYCKOFF  FEC ID number of contributing federal political committee.	NJ 07481	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR PUBLIC AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (ontic	nal)	80.00

or for com  NAME  MEDO  Full Na  MS CO  Mailing  City  WES  FEC II  federa  Name  MEDO  Receip  Full Na  MR RO  Mailing  City  RAM!  FEC II  federa	nmercial purposes, other than using the COF COMMITTEE (In Full) CO HEALTH SOLUTIONS INC.  ame (Last, First, Middle Initial) DLLEEN SMITH g Address 1241 CHENILLE CIR  STON D number of contributing all political committee.	Statements may not be sold or used by any perse name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a. State Zip Code FL 33327	o solicit contributions from such committee.
Full Name MEDO Receip Full Name MEDO Receip Gity A.  Full Name MEDO Receip Gity Full Name MEDO City Full Name MEDO City Full Name Medora	ame (Last, First, Middle Initial) DLLEEN SMITH g Address 1241 CHENILLE CIR STON D number of contributing	State Zip Code	Date of Receipt  1 2 2 2 2 2 0 0 7
A. MS CO Mailing City WES FEC II federa  Name MEDO Receip Full Na MR RO Mailing City RAM! FEC II federa	DLLEEN SMITH  g Address 1241 CHENILLE CIR  STON  D number of contributing all political committee.		12 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receip Full Name Mailing City RAM!	TON  D number of contributing all political committee.		12 22 2007
Receip Full Name MEDC  Receip Gull Name Mailing City RAM! FEC II	D number of contributing Il political committee.		Transaction ID: INC.A.42669
FEC II federal Name MEDO Receip Full Name Mailing City RAM! FEC II federal	D number of contributing Il political committee.	1 L 33321	Amount of Fools Descint this Deviced
Full Na MR RC Mailing City RAM!	of Faculty and	С	Amount of Each Receipt this Period  10.00
Full Na MR RC Mailing City RAMS	of Employer CO HEALTH SOLUTIONS	Occupation SR DIR CLINICAL SVCS	
MR RC Mailing City RAMS FEC II federa	ot For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
City RAMS FEC II federa	ame (Last, First, Middle Initial) DBERT SMITH g Address 40 JOSHUA DR T		Date of Receipt
RAM: FEC II federa	y Address 40 JOSHUA DR I		12 22 2007
FEC II federa	OFV.	State Zip Code	Transaction ID: INC.A.42832
Name MEDC	D number of contributing all political committee.	NJ 07446	Amount of Each Receipt this Period  50.00
WILDO	of Employer CO HEALTH SOLUTIONS	Occupation VP OPS	
	ot For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼  2600.00	
	ame (Last, First, Middle Initial) AVID SNOW, JR	<u> </u>	Date of Receipt
Mailing	g Address 23 CEDAR GATE RO	AD	12 22 2007
City	IENI	State Zip Code	Transaction ID: INC.A.42894
	D number of contributing Il political committee.	CT 06820	Amount of Each Receipt this Period  192.25
Name MEDC	of Employer CO HEALTH SOLUTIONS	Occupation CHAIRMAN & CEO	
	ot For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
SUBTOT			252.25

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 243 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			on for the purpose of soliciting contributions solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC.	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR ALAN SOKALER			Date of Receipt
Mailing Address 30 MICHELLE WAY		7: 0 1	12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42919
PINE BROOK	NJ	07058	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP FINA		
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		1300.00	
Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE	1		Date of Receipt
Mailing Address 21625 E. MERIWETH	IER LANE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: INC.A.42753
LIBERTY LAKE	WA	99019	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 737.50	
Full Name (Last, First, Middle Initial) MR RALPH STAIANO	1		Date of Receipt
Mailing Address 1 LAMBROS DRIVE			12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42538
MONROE	NY	10950	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n BUSINESS REQUIREMENTS	S S
Receipt For:	Aggregate	e Year-to-Date	
Primary General Other (specify) ▼	0 0	650.00	
SUBTOTAL of Receipts This Page (optional) .			100.00

SCHEDULE A (FI	-	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 244 / 310 (check only one)    X   11a
Any information copied from for commercial purpos  NAME OF COMMITT	es, other than using the name an	s may not be sold or used by any person daddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH	SOLUTIONS INC. POLITIC	AL ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First MR CHRISTOPHER ST Mailing Address 7 F	TATEN		Date of Receipt
		7'- Onda	12 22 2007
City WEST HARRISON	Stat NY	<u>'</u>	Transaction ID: INC.A.42816  Amount of Each Receipt this Period
FEC ID number of confederal political commi	ntributing		50.00
Name of Employer MEDCO HEALTH SO	Occu OLUTIONS GRC	pation OUP VP FINANCE	
Receipt For: Primary Other (specify)	General	egate Year-to-Date ▼ 1300.00	
Full Name (Last, First MS JILL STEARNS Mailing Address 13	Middle Initial)		Date of Receipt
	130 HALSELL DN		12 22 2007
City AUSTIN	Stat TX	e Zip Code 78732	Transaction ID: INC.A.42864  Amount of Each Receipt this Period
FEC ID number of confederal political commi	ntributing	70732	50.00
Name of Employer MEDCO HEALTH SC	Occu SR N	pation NATL ACCT EXEC	
Receipt For: Primary Other (specify)	General	egate Year-to-Date ▼ 750.00	
Full Name (Last, First MR CRAIG STEEL	Middle Initial)		Date of Receipt
Mailing Address 12	2 DEMAREST AVENUE		12 22 2007
City EMERSON	Stat NJ	e Zip Code 07630	Transaction ID: INC.A.42636
FEC ID number of confederal political commi	ntributing	07030	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SC	NITIONE I	pation L ACCT EXEC	
Receipt For: Primary Other (specify)	General	egate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts	This Page (optional)		125.00
TOTAL This Period (las	t page this line number only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 245 / 310 (check only one)    X
A C	ny information copied from such Reports and s r for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any pers lress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۷.	Full Name (Last, First, Middle Initial) MR STANLEY STEFANSKI			Date of Receipt
	Mailing Address 24 CASTLETON DRIV		7'- 0-1-	12 22 2007
	City HIGHLAND MILLS	State NY	Zip Code 10930	Transaction ID: INC.A.42524  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR E	BUSINESS PLANNING & DI	<del></del> EV
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	
3.	Full Name (Last, First, Middle Initial) MS AMY STEINKELLNER Mailing Address 1740 HIGHLAND DRI	IVF		Date of Receipt
				12 22 2007
	City ELM GROVE	State WI	Zip Code 53122	Transaction ID: INC.A.42681  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30.12	50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP CLINI	CAL SVCS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	
	Full Name (Last, First, Middle Initial) DR GLEN STETTIN			Date of Receipt
	Mailing Address 8 MILL GLEN CT			12 22 2007
	City	State	Zip Code	Transaction ID: INC.A.42882
	UPPER SADDLE RIVER FEC ID number of contributing federal political committee.	NJ C	07458	Amount of Each Receipt this Period  192.25
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP/GM	CLIN & THERAP SOL GRO	— DUP
	Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 5000.00	
Г				252.25

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 246 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR GERARD STOCKER, JR  Mailing Address 80 ALGONQUIN TRI  City  OAKLAND  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)	State Zip Code NJ 07436  C  Occupation SR NATL ACCT EXEC  Aggregate Year-to-Date  390.00	Date of Receipt    M   M   2 2   2 0 0 7    Transaction ID: INC.A.42637    Amount of Each Receipt this Period   15.00
Full Name (Last, First, Middle Initial) MS JANNA STOUL Mailing Address 4 APACHE WAY  City MONTVILLE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NJ 07045  C  Occupation SR DIR TECHNOLOGY  Aggregate Year-to-Date   450.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR SCOTT STRATTON Mailing Address 351 TIMBERLANE D  City ORANGE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code CT 06477  C  Occupation VP PRODUCT DEVELOPMENT Aggregate Year-to-Date  1300.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 2 2 2 0 0 7  Transaction ID: INC.A.42926  Amount of Each Receipt this Period  50.00
SUBTOTAL of Receipts This Page (optional)		90.00

<b>IT</b> I	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS  y information copied from such Reports and Sta	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any person	FOR LINE NUMBER: PAGE 247 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  on for the purpose of soliciting contributions
or f	or commercial purposes, other than using the one NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. Polymers	name and ad	dress of any political committee to	solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) MS PATRICIA STRETE Mailing Address 19275 PAVER BARNES	2 DOAD		Date of Receipt
	Mailing Address 19275 PAVER BARNES	S RUAD		12 22 2007
	City	State	Zip Code	Transaction ID: INC.A.42584
	MARYSVILLE FEC ID number of contributing federal political committee.	ОН	43040	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIN	n NICAL THERAPEUTICS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
3.	Full Name (Last, First, Middle Initial) MS COLEEN SULLIVAN Mailing Address 38 BARKMILL TERRAC	)E		Date of Receipt  1 2 2 2 2 0 0 7
	City MONTVILLE	State NJ	Zip Code 07045	Transaction ID: INC.A.42862  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR	n BUSINESS REQUIREMENTS	S_
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
<b>)</b> .	Full Name (Last, First, Middle Initial) MS CYNTHIA SULLIVAN			Date of Receipt
	Mailing Address 21 DENISE DRIVE			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.42815  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		192.30
	Name of Employer MEDCO HEALTH SOLUTIONS	-	ANCIAL PLANNING	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2969.20	
sı	JBTOTAL of Receipts This Page (optional)			242.30

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 248 / 310 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any personal the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.)	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MR MARK SULLIVAN Mailing Address 16025 PINE VALE	PL.	Date of Receipt  1 2 2 2 2 0 0 7
City MIDLOTHIAN	State Zip Code VA 23113	Transaction ID: INC.A.42541  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	DIR CS SYSTEMS PLAN & IMPLEM  Aggregate Year-to-Date ▼  650.00	
Full Name (Last, First, Middle Initial) MS IRENE SUTTON  Mailing Address 20 AVENUE @ PO APPT 209	RT IMPERIAL	Date of Receipt  1 2 2 2 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42605
WEST NEW YORK  FEC ID number of contributing federal political committee.	NJ 07093	Amount of Each Receipt this Period 40.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR TECHNOLOGY	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1025.00	
Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT	1	Date of Receipt
Mailing Address 8362 GOLDEN PRA	AIRIE DRIVE	12 22 2007
City	State Zip Code	Transaction ID: INC.A.42646
TAMPA  FEC ID number of contributing federal political committee.	FL 33647	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2600.00	
		115.00

UPPER ARLINGTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:    Variety   V	PAGE 249/310  11c   12   15   16   1	(check only one)  X 11a 11b 11c 12	Use separate schedule(s) for each category of the Detailed Summary Page	•	SCHEDULE A (FEC TEMIZED RECEIPTS	
Full Name (Last, First, Middle Initial)  MRINCHOLAS TAYLOR  Mailing Address 2710 WEXFORD RD  City State Zip Code OH 43221  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS DIR CLINICAL SVCS  Receipt For: Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  State Zip Code OH 43221  Transaction ID: INC.A. Amount of Each Receipt Tr	na contributions	n for the purpose of soliciting contributions solicit contributions from such committee.	lress of any political committee to	es, other than using the name and ad EE (In Full)	or for commercial purposes, othe NAME OF COMMITTEE (In	Ar
MR NICHOLAS TAYLOR  Mailing Address 2710 WEXFORD RD  City State Zip Code OH 43221  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Full Name (Last, First, Middle Initial)  Name of Employer MEDCO HEALTH SOLUTIONS  FILI Name (Last, First, Middle Initial)  Name of Employer MEDCO HEALTH SOLUTIONS  FILI Name (Last, First, Middle Initial)  Name of Employer MEDCO HEALTH SOLUTIONS  FILI Name (Last, First, Middle Initial)  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Occupation  Occupation  SR DIR PRODUCT MGMT  Receipt For:  Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR LARRY THOMAS  Mailing Address 3915 SILKWOOD TRAIL  City State Zip Code  Transaction ID: INC.A.  Amount of Each Receipt  Aggregate Year-to-Date ▼  Transaction ID: INC.A.  Amount of Each Receipt  Transaction ID: INC.A.  Transaction ID: INC.A.  Transaction ID: INC.A.  Transaction		Medco Health PAC)	ACTION COMMITTEE (a.k.a.		/	
City State Zip Code OH 43221    PEC ID number of contributing federal political committee.   C	YYYYY	M M / D D / Y Y Y		DR ,	MR NICHOLAS TAYLOR	
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼ 650.00  Full Name (Last, First, Middle Initial) MS MELINDA THIEL Mailing Address 27 GARVEY ROAD  City State Zip Code NJ 07470  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼ 650.00  Date of Receipt  Transaction ID: INC. A. Amount of Each Receipt  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) MS MELINDA THIEL Transaction ID: INC. A. Amount of Each Receipt  FEC ID number of contributing federal political committee.  C Cocupation SR DIR PRODUCT MGMT  Receipt For: Primary General General General General TX 76016  FULL Name (Last, First, Middle Initial) MR LARRY THOMAS  Mailing Address 3915 SILKWOOD TRAIL  City State Zip Code TX 76016  FEC ID number of contributing federal political committee.  C Transaction ID: INC. A. Amount of Each Receipt  M M M M M M M M M M M M M M M M M M M		Transaction ID: INC.A.42887  Amount of Each Receipt this Period	•		•	
DIR CLINICAL SVCS	25.00			ntributing	FEC ID number of contributir	
Primary General Other (specify) ▼ 650.00  Full Name (Last, First, Middle Initial) Ms MELINDA THIEL Mailing Address 27 GARVEY ROAD  City State Zip Code MAYNE NJ 07470  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS SR DIR PRODUCT MGMT  Receipt For: Aggregate Year-to-Date ▼ 12 22  Transaction ID: INC.A. Amount of Each Receipt					Name of Employer MEDCO HEALTH SOLUTION	
MS MELINDA THIEL  Mailing Address 27 GARVEY ROAD  City State Zip Code WAYNE NJ 07470  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR LARRY THOMAS  Mailing Address 3915 SILKWOOD TRAIL  City State Zip Code ARLINGTON TX 76016  FEC ID number of contributing federal political committee.  City State Zip Code ARLINGTON TX 76016  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  Occupation MANAGING PHARMACIST  Aggregate Year-to-Date ▼  Primary General  Aggregate Year-to-Date ▼				General	Primary Gene	
City State Zip Code NJ 07470  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Name (Last, First, Middle Initial) MR LARRY THOMAS  Mailing Address 3915 SILKWOOD TRAIL  City State Zip Code Transaction ID: INC.A. Amount of Each Receipt  Date of Receipt  Transaction ID: INC.A. Amount of Each Receipt  Date of Receipt  Transaction ID: INC.A. Amount of Each Receipt  Date of Receipt  Transaction ID: INC.A. Amount of Each Receipt  Date of Receipt  Transaction ID: INC.A. Amount of Each Receipt  Amount of Each Receipt  Amount of Each Receipt  Transaction ID: INC.A. Amount of Each Receipt		┥			MS MELINDA THIEL	-
WAYNE  NJ 07470  Amount of Each Receipt  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify) ▼  City  Aggregate Year-to-Date  PEC ID number of contributing federal political committee.  Date of Receipt  Transaction ID: INC.A.  Amount of Each Receipt  Amount of Each Receipt  Transaction ID: INC.A.  Amount of Each Receipt  Date of Receipt  Transaction ID: INC.A.  Amount of Each Receipt  M M M / D D D / 2 2  Transaction ID: INC.A.  Amount of Each Receipt  Transaction ID: INC.A.  Amount of Each Receipt  Transaction ID: INC.A.  Amount of Each Receipt  Aggregate Year-to-Date ▼  Primary General  Aggregate Year-to-Date ▼	2007			GARVEY ROAD	Mailing Address 2/ GAR	
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR LARRY THOMAS  Mailing Address 3915 SILKWOOD TRAIL  City State Zip Code Transaction ID: INC.A.  ARLINGTON TX 76016  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Occupation MANAGING PHARMACIST  Aggregate Year-to-Date ▼		Transaction ID: INC.A.42614	·		•	
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Pagregate Year-to-Date ▼  City State Zip Code ARLINGTON  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  Occupation SR DIR PRODUCT MGMT  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: INC.A.  Amount of Each Receipt  C  Occupation MANAGING PHARMACIST  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼	ipt this Period	Amount of Each Receipt this Period	07470			
Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  650.00   Full Name (Last, First, Middle Initial) MR LARRY THOMAS  Mailing Address 3915 SILKWOOD TRAIL  City State Zip Code ARLINGTON TX 76016  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼	25.00	25.0	<u> </u>	ittee.	federal political committee.	
Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR LARRY THOMAS  Mailing Address 3915 SILKWOOD TRAIL  City State Zip Code ARLINGTON TX 76016  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼				Occupation SR DIR	Name of Employer MEDCO HEALTH SOLUTION	
Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR LARRY THOMAS  Mailing Address 3915 SILKWOOD TRAIL  City State Zip Code  ARLINGTON TX 76016  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Date of Receipt  Transaction ID: INC.A.  Amount of Each Receipt  Occupation  MANAGING PHARMACIST  Aggregate Year-to-Date ▼		-				
MR LARRY THOMAS  Mailing Address 3915 SILKWOOD TRAIL  City State Zip Code  ARLINGTON TX 76016  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Date of Receipt  Transaction ID: INC.A.  Amount of Each Receipt  C  Aggregate Year-to-Date ▼			650.00			
City State Zip Code Transaction ID: INC.A.  ARLINGTON TX 76016  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  1 2 2 2  Transaction ID: INC.A.  Amount of Each Receipt  Occupation MANAGING PHARMACIST  Aggregate Year-to-Date ▼		Date of Receipt		t, Middle Initial)		
ARLINGTON  TX 76016  Amount of Each Receipt  C  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Amount of Each Receipt	2007			15 SILKWOOD TRAIL	Mailing Address 3915 SIL	
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General  C  Occupation MANAGING PHARMACIST  Aggregate Year-to-Date		Transaction ID: INC.A.42793	•			
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Occupation MANAGING PHARMACIST  Aggregate Year-to-Date  229.32	ipt this Period	Amount of Each Receipt this Period	76016	at the state of	•	
Receipt For:  Primary  General  Aggregate Year-to-Date  229 32	4.41	4.4		ittee.	federal political committee.	
Primary General			NG PHARMACIST	MANAGI		
				General	Primary Gene	
SUBTOTAL of Receipts This Page (optional)	54.41	54.4		s This Page (optional)	SUBTOTAL of Receipts This F	s

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 250 / 310   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS MELISSA THOMET			Date of Receipt
Mailing Address 721 HINMAN AVE #1E			12 22 2007
City	State IL	Zip Code	Transaction ID: INC.A.42547
EVANSTON  FEC ID number of contributing federal political committee.	C	60202	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR ACC	n CT MGMT	
Receipt For:  Primary  General  Other (specify)		e Year-to-Date ▼ 305.00	
Full Name (Last, First, Middle Initial) MS MARY THORSBY			Date of Receipt
Mailing Address 17326 ELLEN DR			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City LIVONIA	State MI	Zip Code 48152	Transaction ID: INC.A.42661
FEC ID number of contributing federal political committee.	C	40132	Amount of Each Receipt this Period 75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR NATI	n _ ACCT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1950.00	
Full Name (Last, First, Middle Initial) MR TIMOTHY TIDD			Date of Receipt
Mailing Address 7974 FLAMETREE	СТ		M M / D D / Y Y Y Y Y 1 Y 1 2 2 2 2 2 0 0 7
City LAS VEGAS	State NV	Zip Code 89123	Transaction ID: INC.A.42718
FEC ID number of contributing federal political committee.	C	09123	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1062.50	
SUBTOTAL of Receipts This Page (optional	)		125.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 251 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<u>/</u> A.	MEDCO HEALTH SOLUTIONS INC. F  Full Name (Last, First, Middle Initial) MR WILLIAM TOBIN	POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)  Date of Receipt
-	Mailing Address 838 COLONIAL RD  City	Ctata	7:n Code	12 D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.42551  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP BENI	n EFIT SYSTEMS SUPPORT	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
- В.	Full Name (Last, First, Middle Initial) MRS DONNA TOPOLSKI			Date of Receipt
	Mailing Address 128 MANHATTAN TEF	RRACE		12 22 2007
	City	State	Zip Code	Transaction ID: INC.A.42849
	DUMONT  FEC ID number of contributing federal political committee.	C	07628	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR I	n BUSINESS REQUIREMENTS	8
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
- ).	Full Name (Last, First, Middle Initial) MR HECTOR TORRES Mailing Address 6023 HOMESTEAD CO	DURT		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: INC.A.42755
	HILLIARD FEC ID number of contributing	ОН	43026	Amount of Each Receipt this Period
	federal political committee.	C		4.28
	Name of Employer MEDCO HEALTH SOLUTIONS	<b>-</b>	IVENTORY CONTROL	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 222.56	
	SUBTOTAL of Receipts This Page (optional)			79.28
	TOTAL This Period (last page this line number	only)	<b>.</b>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Χ)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 252/310   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS CLAUDIA TUCKER			Date of Receipt
Mailing Address 713 INDIAN CREEI	K RD		M M / D D / Y Y Y Y Y 1 1 2 2 2 2 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42732
AMHERST  FEC ID number of contributing federal political committee.	C	24521	Amount of Each Receipt this Period  75.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR (	n GOVERNMENT AFFAIRS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 1950.00	
Full Name (Last, First, Middle Initial) MR GARY TULLY			Date of Receipt
Mailing Address 16 FIELDHEDGE D	PRIVE		12 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State NJ	Zip Code	Transaction ID: INC.A.42868
HILLSBOROUGH  FEC ID number of contributing federal political committee.	C	08844	Amount of Each Receipt this Period  30.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CLIE	n ENT SVC DELIVERY	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 755.00	
Full Name (Last, First, Middle Initial) MS CARA VAN ZILE			Date of Receipt
Mailing Address 31 LINCOLN RD			12 22 2007
City KINNELON	State NJ	Zip Code 07405	Transaction ID: INC.A.42657  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07700	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation EXEC DI	n R ANALYTICAL SVCS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional	al)		155.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 253 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	I Statements may not be sold or used by any pentent he name and address of any political committee.  POLITICAL ACTION COMMITTEE (a.)	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MRS MICHELLE VANCURA  Mailing Address W328 S4230 SPRIN  City  WAUKESHA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General  Other (specify)		Date of Receipt    M M M
Full Name (Last, First, Middle Initial)  MRS JEANNINE VANKLEECK  Mailing Address 56 ZIMMER AVENU  City  MIDLAND PARK  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State Zip Code NJ 07432  C  Occupation DIR FINANCIAL APPLICATIONS Aggregate Year-to-Date  650.00	Date of Receipt    M M M
Full Name (Last, First, Middle Initial) MR NICHOLAS VASILOPOULOS Mailing Address 105 ARRANDALE R  City ROCKVILLE CENTRE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State Zip Code NY 11570  C  Occupation VP MKTING  Aggregate Year-to-Date   1300.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		125.00

Any Information capied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes. After than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  MEDCO HEALTH SOLUTIONS NINC, POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Pul Name (Last, First, Middle Initial)  MR WL VELARDE  Maling Address 443 WEST SADDLE RIVER RD  City State Zip Code UPPER SADDLE RIVER  NJ 07458  FEC ID number of contributing federal political committee.  Name of Engloyer MEDCO HEALTH SOLUTIONS  Receipt For:  Name of Engloyer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Office (poperly) Financy General Office (poperly) General Office (poperly		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 254 / 310 (check only one)    X   11a
Full Name (Last, First, Middle Initial)  Mailing Address 443 WEST SADDLE RIVER RD  City State Zip Code UPPER SADDLE RIVER NJ 97458  FEC ID number of contributing tederal political committee.  Name of Employer Mailing Address 201 WATCHUNG AVENUE UNIT #17  City State Zip Code Mailing Address 201 WATCHUNG AVENUE UNIT #17  City State Zip Code Mailing Address 201 WATCHUNG AVENUE UNIT #17  City State Zip Code BLOOMFIELD NJ 97033  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specity) ▼  Full Name (Last, First, Middle Initial)  MR GORDON WOKERS  Mailing Address 436 MOUNTAIN AVENUE  City State Zip Code NJ 97090  Full Name (Last, First, Middle Initial)  NR GORDON WOKERS  Mailing Address 436 MOUNTAIN AVENUE  City State Zip Code NJ 97090  FEC ID number of contributing federal political committee.  City State Zip Code NJ 97090  FEC ID number of Contributing federal political committee.  City State Zip Code NJ 97090  FEC ID number of Contributing federal political committee.  City State Zip Code NJ 97090  FEC ID number of Contributing federal political committee.  City State Zip Code NJ 97090  FEC ID number of Contributing federal political committee.  City State Zip Code NJ 97090  FEC ID number of Contributing federal political committee.  City State Zip Code NJ 97090  FEC ID number of Contributing federal political committee.  City State Zip Code NJ 97090  FEC ID number of Contributing federal political committee.  City State Zip Code NJ 97090  FEC ID number of Contributing federal political committee.  City State Zip Code NJ 97090  FEC ID number of Contributing federal political committee.  City State Zip Code NJ 97090  FEC ID number of Contributing federal political committee.  City State Zip Code NJ 97090  FEC ID number of Contributing federal political committee.  City State Zip Code NJ 97090  FEC ID number of Contributing federal political committee.  City State Zip Code NJ 97090  FEC ID number of Contributing federal politica	7	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	dress of any political committee to	solicit contributions from such committee.
City UPPER SADDLE RIVER NJ 07458  FEC ID number of contributing rederal political committee.  Name of Employer MEDIO HEALTH SOLUTIONS SR DIR E-COM STRAT & DELI Aggregate Year-to-Date ▼  FILI Name (Last, First, Middle Initial)  Milling Address 201 WATCHUNG AVENUE UNIT #17  City State Zip Code NJ 07003  FEC ID number of contributing rederal political committee.  Name of Employer MEDIO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Date of Receipt Transaction ID: INC.A.42603  Amount of Each Receipt this Period  Date of Receipt Transaction ID: INC.A.42599  Amount of Each Receipt Transaction ID: INC.A.42599  Amount of Each Receipt Transaction ID: INC.A.42599  Amount of Each Receipt this Period  FEC ID number of contributing rederal political committee.  Name of Employer MEDICAL  Receipt For:  Primary General Other (specify) ▼  Date of Receipt  Transaction ID: INC.A.42599  Amount of Each Receipt this Period  Date of Receipt Transaction ID: INC.A.42520  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.42520  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.42520  Amount of Each Receipt this Period  Date of Receipt  Transaction ID: INC.A.42520  Amount of Each Receipt this Period  FEC ID number of contributing rederal political committee.  Name of Employer Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Other (specify) ▼  Aggregate Year-to-Date ▼  Transaction ID: INC.A.42520  Amount of Each Receipt this Period  PEC ID number of contributing rederal political committee.  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  Other (specify) ▼	∠ <b>.</b> .	Full Name (Last, First, Middle Initial) MR WIL VELARDE		,	Date of Receipt
Secret   For:				·	Transaction ID: INC.A.42603
Receipt For:     Primary		federal political committee.			40.00
MR JEFFREY VERNICE  Mailing Address 201 WATCHUNG AVENUE  UNIT #17  City State Zip Code BLOOMFIELD NJ 07003  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  FUIl Name (Last, First, Middle Initial)  MR GORDON VICKERS  Mailing Address 436 MOUNTAIN AVENUE    Value of Employer NJ 07090  FUIl Name (Last, First, Middle Initial)  MR GORDON VICKERS  Mailing Address 436 MOUNTAIN AVENUE    Value of Receipt   Value of Recei		Receipt For: Primary General	SR DIR	E-COM STRAT & DELI e Year-to-Date ▼  1040.00	
City State Zip Code NJ 07003  FEC ID number of contributing federal political committee.  Name of Employer MEDICAL  Feceipt For: Primary General Other (specify) ▼  C State Zip Code NJ 07003  Amount of Each Receipt this Period  C 25.00  Transaction ID: INC.A. 42599  Amount of Each Receipt this Period  25.00  Transaction ID: INC.A. 42599  Amount of Each Receipt this Period  25.00  Date of Receipt  M M GORDON VICKERS  Mailing Address 436 MOUNTAIN AVENUE  City State Zip Code NJ 07090  FEC ID number of contributing federal political committee.  Name of Employer MEDICAL Hack Tips Cocupation NATL ACCT EXEC  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Occupation NATL ACCT EXEC  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Other (specify) ▼  Aggregate Year-to-Date ▼	3.	MR JEFFREY VERNICE  Mailing Address 201 WATCHUNG AVE	NUE		M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.    Name of Employer MEDCO HEALTH SOLUTIONS   Occupation SR DIR MEDICAL		City		Zip Code	
Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  MR GORDON VICKERS  Mailing Address 436 MOUNTAIN AVENUE  City State Zip Code WESTFIELD  NJ 07090  FEC ID number of contributing federal political committee.  Name of Employer MEDICAL  Name of Employer MEDICAL  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Other (specify) ▼  Aggregate Year-to-Date ▼		FEC ID number of contributing		07003	
Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) MR GORDON VICKERS  Mailing Address 436 MOUNTAIN AVENUE  City State Zip Code WESTFIELD NJ 07090  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  650.00		Name of Employer MEDCO HEALTH SOLUTIONS			
Mailing Address 436 MOUNTAIN AVENUE  City State Zip Code WESTFIELD NJ 07090  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Date of Receipt  1 2 2 2 7 2 0 0 7  Transaction ID: INC.A.42520  Amount of Each Receipt this Period  25.00		Primary General		e Year-to-Date ▼	
City WESTFIELD NJ 07090  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify) ▼  State Zip Code NJ 07090  Amount of Each Receipt this Period  25.00  Aggregate Year-to-Date ▼  650.00		MR GORDON VICKERS	UE		M M / D D / Y Y Y Y
WESTFIELD  NJ 07090  Amount of Each Receipt this Period  EC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  650.00		City	State	Zip Code	
federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  650.00		•		•	
MEDCO HEALTH SOLUTIONS  NATL ACCT EXEC  Receipt For:  Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  650.00			C		25.00
Primary General Other (specify) ▼  650.00		Name of Employer MEDCO HEALTH SOLUTIONS			
SURTOTAL of Receipts This Page (optional)		Primary General	Aggregate		
CODICIAL OF Teccipis This rage (optional)		SUBTOTAL of Receipts This Page (optional)			90.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 255/310   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) MR MUNISH VIJ			Date of Receipt
Mailing Address 11 BOULDER TRA		7'- O-d-	12 22 2007
City MAHWAH	State NJ	Zip Code 07430	Transaction ID: INC.A.42910  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	n CAL SPECIALIST	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR MICHAEL WAIBEL			Date of Receipt
Mailing Address N48 W16381 LONE	E OAK LN		12 22 YYYYY 12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42682
MENOMONEE FALLS	WI	53051	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		15.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR A	n ACCT MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 390.00	]
Full Name (Last, First, Middle Initial) MR DANIEL WALDEN			Date of Receipt
Mailing Address 450 BEECHMONT	DR		12 22 YYYY 12 22 2007
City NEW ROCHELLE	State NY	Zip Code 10804	Transaction ID: INC.A.42788  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		192.25
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP REC	n GULATORY & MC PROGRA	.MS
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This Page (optional	ıl)		232.25

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 256 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MS THERESE WALKER Mailing Address 363 MULBERRY CT  City WYCKOFF  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General	State Zip Code NJ 07481  C  Occupation SR DIR PRODUCT MGMT  Aggregate Year-to-Date   650.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR WILLIAM WALLACE Mailing Address 5445 GOODWIN AV  City  DALLAS  FEC ID number of contributing	1 0 0 0 0 0 0 0	Date of Receipt    M M
Receipt For:  Primary  Other (specify) ▼	Occupation VP SALES SEGMENT LEADER Aggregate Year-to-Date   5000.00	]
Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE Mailing Address 5 APPLE ORCHARD City	RD State Zip Code	Date of Receipt  1 2 2 2 2 0 0 7  Transaction ID: INC.A.42737
MOORESTOWN  FEC ID number of contributing federal political committee.	NJ 08057	Amount of Each Receipt this Period  50.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	Occupation VP/GM  Aggregate Year-to-Date ▼  912.50	
SUBTOTAL of Receipts This Page (optional)		267.25

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 25//310   (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may the name and add	not be sold or used by any person ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	CTION COMMITTEE (a.k.a	a. Medco Health PAC)
Full Name (Last, First, Middle Initial) MS CATHERINE WASSON			Date of Receipt
Mailing Address 26072 HARBOR VI			12 22 2007
City CAPISTRANO BEACH	State CA	Zip Code 92624	Transaction ID: INC.A.42554  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	32027	50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP NATL		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	
Full Name (Last, First, Middle Initial) MS BEVERLY WATSON	<b>-</b>		Date of Receipt
Mailing Address 2 MICHELANGELC	COURT		12 22 7 2007
City SOMERSET	State NJ	Zip Code 08873	Transaction ID: INC.A.42782  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR BEN	EFIT DELIVERY SYSTEMS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MS DONNA WEATHERS			Date of Receipt
Mailing Address 1043 BELL STREE	Т		12 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City EDMONDS	State WA	Zip Code 98020	Transaction ID: INC.A.42713  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	10.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation NATL AC	CT EXEC	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 260.00	
SUBTOTAL of Receipts This Page (optiona	.1)		85.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 258 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) MRS KELLY WEBBER Mailing Address 107 UPPER SADDLI  City MONTVALE FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:	State NJ C Occupation VP COR	Zip Code 07645 n P HR	Date of Receipt    M M
Primary General Other (specify)  Full Name (Last, First, Middle Initial)	Aggregate	e Year-to-Date ▼ 2125.00	
MR TIMOTHY WENTWORTH  Mailing Address 309 WATERVIEW D  City FRANKLIN LAKES  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State NJ C Occupation PRES, C	Zip Code 07417  n EO ACCREDO e Year-to-Date ▼ 5000.00	Date of Receipt    M   M   22   2007    Transaction ID: INC.A.42624    Amount of Each Receipt this Period   192.25
Full Name (Last, First, Middle Initial) MR KENNETH WERMES Mailing Address 26037 N WRANGLE  City SCOTTSDALE  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For: Primary General Other (specify)	State AZ C Occupation VP/GM	Zip Code 85255 n e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	·		367.25

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 259 / 310 (check only one)    X
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL /	ACTION COMMITTEE (a.k.a	Medco Health PAC)
Full Name (Last, First, Middle Initial) MR PETER WHITE			Date of Receipt
Mailing Address 2241 E. PINCHOT AVE #17F	Ξ.		12 22 YYYY 12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42542
PHOENIX	AZ	85016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR ACC	n CT MGMT	
Receipt For:		e Year-to-Date ▼	7
Primary General Other (specify) ▼		650.00	
Full Name (Last, First, Middle Initial) MS BEVERLY WINKLER			Date of Receipt
Mailing Address 17 LYNWOOD RD			M M / D D / Y Y Y Y Y Y Y 12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42812
VERONA	NJ	07044	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio SR DIR	n ORG DEV	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MR STEPHEN WOGEN			Date of Receipt
Mailing Address 145 WAUGHAW ROAL	)		12 22 2007
City	State	Zip Code	Transaction ID: INC.A.42639
TOWACO	NJ	07082	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP MED	n ICARE FINANCE	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (optional)			100.00

TOTAL This Period (last page this line number only) .....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 260 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
Ar	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	name and ad	dress of any political committee to	solicit contributions from such committee.
. <u>/</u>	Full Name (Last, First, Middle Initial) MRS ELISSA WOJTOWICZ, RPH	OLITIOAL /	AOTION COMMITTEE (a.n.a	Date of Receipt
	Mailing Address 325 BOUND BROOK A			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City PISCATAWAY	State NJ	Zip Code 08854	Transaction ID: INC.A.42552  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00004	30.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR RRA		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 750.00	
 3.	Full Name (Last, First, Middle Initial) MS ANNA WONG Mailing Address 64-20 BELL BLVD			Date of Receipt
		12 22 2007		
	City BAYSIDE	State NY	Zip Code 11364	Transaction ID: INC.A.42907
	FEC ID number of contributing federal political committee.	C	11304	Amount of Each Receipt this Period  50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP INSL	n IRED SOLUTIONS	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
	Full Name (Last, First, Middle Initial) MS CYNTHIA WOOD			Date of Receipt
	Mailing Address 4002 FALCON LAKE D	PR		12 22 2007
	City ARLINGTON	State TX	Zip Code 76016	Transaction ID: INC.A.42796  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PRO	n DFESSIONAL PRACTICES	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 215.00	
s	UBTOTAL of Receipts This Page (optional)			85.00
Ļ	OTAL This Period (last page this line number of	anly)	•	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 261 / 310 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MS JUDITH WOOD  Mailing Address 76 COLONIAL ROA	D		Date of Receipt  1 2 2 2 2 0 0 7
City STILLWATER	State NY	Zip Code 12170	Transaction ID: INC.A.42856  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Occupation		25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	SR DIR A	ACCT MGMT  Year-to-Date ▼  650.00	
Full Name (Last, First, Middle Initial) MR SERGEY YANITSKIY Mailing Address 793 LINCOLN AVE			Date of Receipt  1 2 2 2 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.42597
POMPTON LAKES	NJ	07442	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation TECHNIC	DAL SPECIALIST	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) MS SARAH YINGLING	•		Date of Receipt
Mailing Address 901 ST MARKS AVE	≣		12 22 2007
City WESTFIELD	State NJ	Zip Code 07090	Transaction ID: INC.A.42699  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07090	25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SR DIR F	n PRODUCT MGMT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optional)	)		75.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 262 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MR DANIEL ZELEM, JR	_		Date of Receipt
	Mailing Address 219 SPOOK ROCK F		7: 0.1	12 22 2007
	City SUFFERN	State NY	Zip Code 10901	Transaction ID: INC.A.42770  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP E-CC		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
- В.	Full Name (Last, First, Middle Initial) MS JILL ZELMAN Mailing Address 43604 EMERALD DU	NEC DI		Date of Receipt
				12 22 2007
	City LEESBURG	State VA	Zip Code 20176	Transaction ID: INC.A.42827  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1 1 1 1 1	25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR COI	on NSOLIDATION PLAN & RPR	<u> </u>
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
с. С.	Full Name (Last, First, Middle Initial) MR ANTHONY ZOLFO			Date of Receipt
	Mailing Address 726 HIGH MOUNTAIL	N ROAD		12 22 YYYY 12 22 2007
	City FRANKLIN LAKES	State NJ	Zip Code 07417	Transaction ID: INC.A.42917  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation ASST Co	on OUNSEL	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
	SUBTOTAL of Receipts This Page (optional) .			100.00
	TOTAL This Period (last page this line numbe	r only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 263 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
А.	Full Name (Last, First, Middle Initial) JEAN K. BERGWALL			Date of Receipt
	Mailing Address 1640 CENTURY CEN	TER PKWY.		12 28 7 2007
	City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42969
	FEC ID number of contributing federal political committee.	C	30134	Amount of Each Receipt this Period  25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIR PRO	DDUCT LINE II	
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) CALVIN BINGHAM Mailing Address 1640 CENTURY CENT			Date of Receipt
	Mailing Address 1640 CENTURY CEN	TER PKWY.		12 28 7 2007
	City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42970  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30104	25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation GENERA	on AL MANAGER	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
_ C.	Full Name (Last, First, Middle Initial) KEN BODMER			Date of Receipt
	Mailing Address P.O. BOX 381947			12 28 YYYYY 12007
	City GERMANTOWN	State TN	Zip Code 38183	Transaction ID: INC.A.42971  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation SVP FIN	on IANCE AND CLIENT SALES	
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 3600.00	
Ţ,	SUBTOTAL of Receipts This Page (optional) .	1		250.00
	FOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 264 / 310   (check only one)     X
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	CTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) RUSS M. BOURNE			Date of Receipt
Mailing Address 1640 CENTURY CE	ENTER PKWY.		12 28 2007
City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42972
FEC ID number of contributing federal political committee.	C	30134	Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation VP SALE		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) STEVEN BROWN			Date of Receipt
Mailing Address 1620 CENTURY CE	ENTER PARKW	AY	1 2 2 8 2 0 0 7
City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42974
FEC ID number of contributing federal political committee.	C	30104	Amount of Each Receipt this Period  25.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation	PR - PRODUCT LINE	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) AMANDA J. BUNDY			Date of Receipt
Mailing Address 1640 CENTURY CE	ENTER PKWY.		1 2 2 8 2 0 0 7
City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42975
FEC ID number of contributing federal political committee.	C	30134	Amount of Each Receipt this Period 50.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation VP REIMI	BURSEMENT	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 265 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to C. POLITICAL ACTION COMMITTEE (a.k.a.	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) BRIAN A. BURFORD  Mailing Address 1640 CENTURY C  City MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For: Primary General Other (specify)	State Zip Code TN 38134  C  Occupation DIR BUSINESS DEVELOPMENT Aggregate Year-to-Date  300.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) JOSEPH A. CASACCIA, JR. Mailing Address 1640 CENTURY C  City MEMPHIS FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For: Primary General	State Zip Code TN 38134  C  Occupation DIR SPECIALITY OPS CUST SERVICE Aggregate Year-to-Date	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) NICHOLAS CLIFTON Mailing Address 1640 CENTURY C  City MEMPHIS FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For: Primary General	ENTER PKWY.  State Zip Code TN 38134  C  Occupation AVP SALES  Aggregate Year-to-Date ▼  300.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼  SUBTOTAL of Receipts This Page (option	al)	75.00

	OULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 266 / 310 (check only one)    X
or for com	nation copied from such Reports and S mercial purposes, other than using the OF COMMITTEE (In Full) CO HEALTH SOLUTIONS INC. F	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Na JEFFRE	me (Last, First, Middle Initial) EY A. COOLE  Address 1640 CENTURY CENT			Date of Receipt
City <u>MEM</u> F		State TN	Zip Code 38134	Transaction ID: INC.A.42979  Amount of Each Receipt this Period
federal	number of contributing political committee.	Occupatio	n	50.00
Receipt	of Employer EDO HEALTH GROUP, INC.  It For:  Irimary General  Other (specify) ▼	VP TAX	& REGULATORY REPORTII	NG ]
WARRE	me (Last, First, Middle Initial) EN J. DAVIS Address 1640 CENTURY CEN	ΓER PKWY.		Date of Receipt  1 2 2 8 2 0 0 7
City	OLUC	State	Zip Code	Transaction ID: INC.A.42980
	number of contributing political committee.	C	38134	Amount of Each Receipt this Period  25.00
Name o	of Employer EDO HEALTH GROUP, INC.	Occupatio DIR FINA		
	t For: 'rimary General other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
MICHE	me (Last, First, Middle Initial) LLE R. DERRYBERRY Address 1640 CENTURY CENT	ΓER PKWY.		Date of Receipt  1 2 2 8 2 0 0 7
City MEMF	эшс	State TN	Zip Code 38134	Transaction ID: INC.A.42981  Amount of Each Receipt this Period
FEC ID	number of contributing political committee.	C	30134	25.00
Name o	of Employer EDO HEALTH GROUP, INC.	Occupatio DIR REII	n MBURSEMENT	
	t For: Irimary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
CURTOT	<b>AL</b> of Receipts This Page (optional)			100.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 267/310   (check only one)     X   11a
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Full Name (Last, First, Middle Initial) ANDREW DOEDYNS			Date of Receipt
Mailing Address 1640 CENTURY C	ENTER PKWY.		1 2 2 8 2 0 0 7
City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42982  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIR CLIN	IICAL OPERATIONS	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) SUMIT DUTTA			Date of Receipt
Mailing Address 534 HUDSON ST.	#3C		M M / D D / Y Y Y Y Y 1 1 2 8 2 8 2 0 0 7
City NEW YORK	State NY	Zip Code	Transaction ID: INC.A.42983
FEC ID number of contributing federal political committee.	C	10014	Amount of Each Receipt this Period 77.00
Name of Employer ACCREDO NOVA FACTOR	Occupation PRESIDE		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 308.00	
Full Name (Last, First, Middle Initial) REBECCA R. DYER			Date of Receipt
Mailing Address 1640 CENTURY C	ENTER PKWY.		M M / D D / Y Y Y Y Y 1 Y 1 2 8 2 0 0 7
City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42984  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30101	25.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIR PRC	n DJECT MANAGEMENT	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 275.00	
SUBTOTAL of Receipts This Page (option	al)	<b>\</b>	127.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 268 / 310 (check only one)    X   11a
or for commercial purposes, other than NAME OF COMMITTEE (In Full)	orts and Statements may not be sold or used by any pusing the name and address of any political committees.  S INC. POLITICAL ACTION COMMITTEE (a.	ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial RICHARD FARIS  Mailing Address 2020 HEATHI  City  MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For:  Primary  Other (specify)	State Zip Code TN 38119	Date of Receipt    M M M
Full Name (Last, First, Middle Initial CHAD FOREMAN Mailing Address 1640 CENTUI  City MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer ACCREDO HEALTH GROUP, INC.  Receipt For: Primary Other (specify)	State Zip Code TN 38134	Date of Receipt    M M M
Full Name (Last, First, Middle Initial KEVIN FRANCO  Mailing Address 648 RIVERSII #222  City  MEMPHIS  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)		Date of Receipt  1 2
SUBTOTAL of Receipts This Page (c	ptional)	125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 269 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any p the name and address of any political committees. POLITICAL ACTION COMMITTEE (a.	
MEDCO REALTH SOLUTIONS INC	POLITICAL ACTION COMMITTEE (a.	.k.a. Wedco Health PAC)
Full Name (Last, First, Middle Initial) ROBERT FURTH		Date of Receipt
Mailing Address 1640 CENTURY CE	NTER PKWY.	12 28 2007
City	State Zip Code	Transaction ID: INC.A.42988
MEMPHIS  FEC ID number of contributing federal political committee.	TN 38134	Amount of Each Receipt this Period 25.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation GENERAL MANAGER	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  275.00	
Full Name (Last, First, Middle Initial) SHARON D. HARRIS		Date of Receipt
Mailing Address 186 N. WHITE STA	TION RD.	1 2 2 8 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42989
MEMPHIS	TN 38117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIRECTOR - HR	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) DAN HAYES		Date of Receipt
Mailing Address 4679 AYRON TERR	ACE	M M / D D / Y Y Y Y Y 1 1 2 2 8 2 0 0 7
City	State Zip Code	Transaction ID: INC.A.42990
PALM HARBOR  FEC ID number of contributing federal political committee.	FL 34685	Amount of Each Receipt this Period 50.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation VP - OPERATIONS	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  700.00	
	)	100.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 270 / 310 (check only one)    X
A 0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۷.	Full Name (Last, First, Middle Initial) ELIZABETH A. HOLLOWAY			Date of Receipt
	Mailing Address 1640 CENTURY CEN	ITER PKWY.		12 28 2007
	City	State	Zip Code	Transaction ID: INC.A.42991
	MEMPHIS	TN	38134	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation SR LEG	n AL COUNSEL	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) LYNN HOSTMYER			Date of Receipt
	Mailing Address 1640 CENTURY CEN	ITER PKWY.		12 28 2007
	City Stat		Zip Code	Transaction ID: INC.A.42992
	MEMPHIS	TN	38134	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation GENERA	n AL MANAGER	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		300.00	
	Full Name (Last, First, Middle Initial) RICHARD KLUSOVSKY			Date of Receipt
	Mailing Address 1016 FAIRWOOD LA	NE		1 2 2 8 2 0 0 7
	City	State	Zip Code	Transaction ID: INC.A.42993
	ACWORTH	GA	30101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIRCTO	n R - MANAGED CARE	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	350.00	
Г				75.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 2/1 / 310   (check only one)     X
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	C. POLITICAL A	CTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial)  JAMES P. LANGLEY			Date of Receipt
Mailing Address 1640 CENTURY CE	ENTER PKWY.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42994
FEC ID number of contributing federal political committee.	C	30134	Amount of Each Receipt this Period  50.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation VP REIM	BURSEMENT	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) PATRICIA LETCHWORTH			Date of Receipt
Mailing Address 1640 CENTURY CE	ENTER PKWY.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42995  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIR REIM	IBURSEMENT	
Receipt For:  Primary General	<del>- '</del>	Year-to-Date ▼	
Other (specify)		300.00	
Full Name (Last, First, Middle Initial) SHELLY I. MARTIN			Date of Receipt
Mailing Address 1640 CENTURY CE	ENTER PKWY.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42996  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30134	25.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation DIR HUM	AN RESOURCES	
Receipt For:  Primary General	Aggregate	Year-to-Date ▼	
Other (specify)		250.00	
SUBTOTAL of Receipts This Page (optional	l)(li		100.00
TOTAL This Period (last page this line num	ber only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 272 / 310 (check only one)    X
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	dress of any political committee to	o solicit contributions from such committee.
/	MEDCO HEALTH SOLUTIONS INC. F	OLITICAL /	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۱.	Full Name (Last, First, Middle Initial) THOMAS O. MARTIN			Date of Receipt
	Mailing Address 1640 CENTURY CENT	ΓER PKWY.		12 28 2007
	City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.42997  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30134	50.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupatio VP COR	n P STRAT BUS DEVELOPMI	ENT
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
- 3.	Full Name (Last, First, Middle Initial) THOMAS S. MCCANN			Date of Receipt
	Mailing Address 1640 CENTURY CENT	ailing Address 1640 CENTURY CENTER PKWY.		
	City	State	Zip Code	Transaction ID: INC.A.42998
	MEMPHIS FEC ID number of contributing federal political committee.	C	38134	Amount of Each Receipt this Period  50.00
	Name of Employer ACCREDO HEALTH GROUP, INC.	Occupatio VP SALE		
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 550.00	
	Full Name (Last, First, Middle Initial)  DANETTE MEREDITH  Mailing Address 1640 CENTURY CENT	Ι ΓER PKWY.		Date of Receipt  1 2 2 8 2 0 0 7
	City	State	Zip Code	Transaction ID: INC.A.42999
	MEMPHIS FEC ID number of contributing	C	38134	Amount of Each Receipt this Period 25.00
	rederal political committee.  Name of Employer ACCREDO HEALTH GROUP, INC.	Occupatio		
	Receipt For:  Primary General  Other (specify)		AL MANAGER - MULTI BRA e Year-to-Date   300.00	N¢H
	SUBTOTAL of Receipts This Page (optional)			125.00

SCHEDULE A (FEC FITEMIZED RECEIPTS	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 273 / 310 (check only one)    X
or for commercial purposes, other  NAME OF COMMITTEE (In Fi	than using the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.  I. Medco Health PAC)
Full Name (Last, First, Middle I SUZANNE RICHARDS	,		Date of Receipt
Mailing Address 21357 WE	ST 115TH TERRACE State	Zip Code	1 2 2 8 2 0 0 7  Transaction ID: INC.A.43001
ORATHE	KS	66061	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	, INC. Occupatio	n R - BUSINESS DEVELOPME	NT NT
Receipt For:  Primary General Other (specify) ▼		e Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle I BARRY SOUTHERN	,		Date of Receipt
Mailing Address 1640 CEN	TURY CENTER PKWY.		12 28 7 2007
City	State	Zip Code	Transaction ID: INC.A.43002
MEMPHIS	TN	38134	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer ACCREDO HEALTH GROUP	, INC. Occupatio	n AL MANAGER	
Receipt For:  Primary Genera  Other (specify) ▼		e Year-to-Date ▼ 300.00	1
Full Name (Last, First, Middle I	nitial)		Date of Receipt
	TURY CENTER PARKW	VAY	12 28 2007
City	State	Zip Code	Transaction ID: INC.A.43003
MEMPHIS	TN	38134	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP	GROUP	VICE-PRESIDENT - CORPO	DRATE FINAN
Receipt For:  Primary Genera  Other (specify) ▼	""	e Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Par	ge (optional)		100.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 274 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. P			on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) CHANTAL D. VEEVAETE	OLITIOAL A	OTION COMMITTEE (a.K.a	Date of Receipt
Mailing Address 7292 OAKVILLE DR.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City GERMANTOWN	State TN	Zip Code 38138	Transaction ID: INC.A.43004  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30130	50.00
Name of Employer ACCREDO HEALTH GROUP, INC. Receipt For:		ESIDENT, HUMAN RESOU Year-to-Date ▼	RCES
Primary General Other (specify) ▼	Aggregate	600.00	
Full Name (Last, First, Middle Initial)  MARK WEGRYN			Date of Receipt
Mailing Address 1717 DYMOKE DRIVE			12 28 2007
City COLLIERVILLE	State TN	Zip Code 38017	Transaction ID: INC.A.43005
FEC ID number of contributing federal political committee.	C	30017	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation AVP QA A	AND PRODUCT INTEGRAT	
Receipt For:  Primary General  Other (specify) ▼	Aggregate `	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) BRENDA WRIGHT			Date of Receipt
Mailing Address 1640 CENTURY CENT	ER PKWY.		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City MEMPHIS	State TN	Zip Code 38134	Transaction ID: INC.A.43006  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer ACCREDO HEALTH GROUP, INC.	Occupation VP QUAL	ITY INTEGRITY HEALTH	
Receipt For:  Primary  General  Other (specify) ▼	<del>, '</del>	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)			125.00

TOTAL This Period (last page this line number only) .....

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 275 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	POLITICAL .	ACTION COMMITTEE (a.k.a	ı. Medco Health PAC)
Α.	Full Name (Last, First, Middle Initial) MS MARIA ANDERSON	15		Date of Receipt
	Mailing Address 4605 W SUNSET BL\	/U		12 29 2007
	City TAMPA	State FL	Zip Code 33629	Transaction ID: INC.A.43298  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00020	5.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR CUS		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	
- В.	Full Name (Last, First, Middle Initial) MR DAVID BAUGH	<u> </u>		Date of Receipt
	Mailing Address 1813 ADONIS AVE			12 29 2007
	City HENDERSON	State NV	Zip Code 89074	Transaction ID: INC.A.43391
	FEC ID number of contributing federal political committee.	C	09074	Amount of Each Receipt this Period  23.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation MGR BE	on ENEFIT DELIVERY SYSTEM	S
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1042.00	]
с. С.	Full Name (Last, First, Middle Initial) MS CHRISTINE BIZARRO			Date of Receipt
	Mailing Address 26 DAYLILY DRIVE			12 29 2007
	City	State	Zip Code	Transaction ID: INC.A.43443
	MOUNT LAUREL  FEC ID number of contributing federal political committee.	C	08054	Amount of Each Receipt this Period  15.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR HR	on	_
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 555.00	
	SUBTOTAL of Receipts This Page (optional) .	1		43.00
	TOTAL This Period (last page this line number	r only)	······································	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 276 / 310 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
A	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC.	e name and ad	dress of any political committee to	o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) MR BARRY BOUDREAUX Mailing Address 3380 SADDLEBROOM	< STREET		Date of Receipt  1 2 2 9 2 0 0 7
	City LAS VEGAS	State NV	Zip Code 89141	Transaction ID: INC.A.43025  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS		ARM PRACTICE	
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 1300.00	
	Full Name (Last, First, Middle Initial)  MR JASON COLE  Mailing Address 14917 E BELLA VIST.	A		Date of Receipt  1 2 2 9 2 0 0 7
	City	State	Zip Code	Transaction ID: INC.A.43192
	VERADALE	WA	99037	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		10.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio DIR PHA	n ARM PRACTICE	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	
	Full Name (Last, First, Middle Initial) MR KENNETH DANIELS Mailing Address 2903 CHUKKAR COU	IRT		Date of Receipt  1 2 2 9 2 0 0 7
	City PLANT CITY	State FL	Zip Code 33567	Transaction ID: INC.A.43256
	FEC ID number of contributing federal political committee.	C	33307	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupatio VP/GM	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
	SUBTOTAL of Receipts This Page (optional)			60.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 277 / 310 (check only one)    X   11a
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	e name and addres	ss of any political committee to	o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR WILLIS DINGLE  Mailing Address 17826 ARBOR GREE  City  TAMPA  FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify)	State FL  C  Occupation SR DIR HR	Zip Code 33647 ear-to-Date ▼	Date of Receipt    M   M   29   2007    Transaction ID: INC.A.43123    Amount of Each Receipt this Period   25.00
Full Name (Last, First, Middle Initial) MS GEORGIA EDDLEMAN Mailing Address 908 EDGEMEER LAN  City SOUTHLAKE  FEC ID number of contributing federal political committee.	State TX	Zip Code 76092	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	Occupation VP/GM Aggregate Ye	ear-to-Date ▼ 1791.40	
MR JOSEPH FRENDO  Mailing Address 9 GREEN HILL TRAIL  City  TROPHY CLUB	- State TX	Zip Code 76262	Date of Receipt  1 2 2 9 2 0 0 7  Transaction ID: INC.A.43262  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		50.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 2600.00	
SUBTOTAL of Receipts This Page (optional) .			109.45

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>K</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 278 / 310 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR ROBERT GIBBS  Mailing Address 544 DENMOOR CO	OURT		Date of Receipt  1 2 2 9 2 0 0 7
City  GALLOWAY  FEC ID number of contributing federal political committee.	State OH	Zip Code 43119	Transaction ID: INC.A.43064  Amount of Each Receipt this Period  12.50
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼		n RM PRACTICE Year-to-Date ▼	
Full Name (Last, First, Middle Initial) MR J. HOLLINGER Mailing Address 784 CAPE HENRY	DR		Date of Receipt  1 2 2 9 2 0 0 7
City COLUMBUS  FEC ID number of contributing federal political committee.	State OH	Zip Code 43228	Transaction ID: INC.A.43246  Amount of Each Receipt this Period  4.17
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary General Other (specify) ▼	- + +	INESS PLANNING Year-to-Date  216.84	
Full Name (Last, First, Middle Initial) MR RICHARD JONES Mailing Address 12 WADE HAMPTO	ON TRAIL		Date of Receipt
City HENDERSON FEC ID number of contributing federal political committee.	State NV	Zip Code 89052	1 2 2 9 2 0 0 7  Transaction ID: INC.A.43323  Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	_	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 863.52	
SUBTOTAL of Receipts This Page (optional	al)		41.67

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 279 / 310 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
7	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
 	MEDCO HEALTH SOLUTIONS INC.  Full Name (Last, First, Middle Initial) MR ROSS LUCE Mailing Address 1066 WEST GROVE  City GIBSONIA FEC ID number of contributing		Zip Code 15044	Date of Receipt  1 2 2 9 2 0 0 7  Transaction ID: INC.A.43118  Amount of Each Receipt this Period
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  Other (specify) ▼	Occupation VP OPS		
- 3.	Full Name (Last, First, Middle Initial) MR GILBERT RAINES Mailing Address 800 SANDY TRAIL			Date of Receipt  1 2 2 9 2 0 0 7
	City	State	Zip Code	Transaction ID: INC.A.43406
	KELLER  FEC ID number of contributing federal political committee.  Name of Employer	TX C	76248	Amount of Each Receipt this Period  25.00
	Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼	DIR HR	e Year-to-Date ▼ 610.00	
	Full Name (Last, First, Middle Initial) MRS MONICA REED Mailing Address 8475 DUNHAM STAT	TION DRIVE		Date of Receipt  1 2 2 9 2 0 0 7
	City	State	Zip Code	Transaction ID: INC.A.43205
	TAMPA  FEC ID number of contributing federal political committee.	FL C	33647	Amount of Each Receipt this Period 25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR PHA	n ARM PRACTICE	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
	SUBTOTAL of Receipts This Page (optional) .			65.00
	TOTAL This Period (last page this line number	r only)	<b>-</b>	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	(X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 280 / 310 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS IN	ng the name and add	dress of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  MR FRANK SCHULTE  Mailing Address 2121 AMERICA'S	CUP CIR		Date of Receipt
City LAS VEGAS	State NV	Zip Code 89117	1 2 2 9 2 0 0 7  Transaction ID: INC.A.43140  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MEDCO HEALTH SOLUTIONS  Receipt For:  Primary  General  Other (specify) ▼		AL VP PHARMACIES  Year-to-Date   1300.00	
Full Name (Last, First, Middle Initial) MR THOMAS SHANAHAN, III Mailing Address 266 BRUSHY CRI	EEK AVE		Date of Receipt    M
City	State	Zip Code	Transaction ID: INC.A.43222
LAS VEGAS	NV	89148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		45.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation DIR OPS		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 2065.45	
Full Name (Last, First, Middle Initial) MS JENNIFER SPIDLE	•		Date of Receipt
Mailing Address 21625 E. MERIWI	ETHER LANE		12 29 2007
City	State WA	Zip Code	Transaction ID: INC.A.43250
LIBERTY LAKE  FEC ID number of contributing federal political committee.	C	99019	Amount of Each Receipt this Period  25.00
Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	1	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 737.50	
SUBTOTAL of Receipts This Page (option	nal)		95.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 281 / 310 (check only one)    X
A	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	MEDCO HEALTH SOLUTIONS INC.	POLITICAL A	ACTION COMMITTEE (a.k.a	a. Medco Health PAC)
۱.	Full Name (Last, First, Middle Initial) MR TIMOTHY SWETT  Mailing Address 8362 GOLDEN PRAI	RIE DRIVE		Date of Receipt
				12 29 2007
	City	State	Zip Code	Transaction ID: INC.A.43142
	TAMPA	<u>FL</u>	33647	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM	n	
	Receipt For:	Aggregate	e Year-to-Date 🔻	
	Primary General Other (specify) ▼		2600.00	
	Full Name (Last, First, Middle Initial) MR LARRY THOMAS			Date of Receipt
	Mailing Address 3915 SILKWOOD TF			12 / 29 / 2007
	City	State	Zip Code	Transaction ID: INC.A.43291
	ARLINGTON	TX	76016	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		4.41
	Name of Employer MEDCO HEALTH SOLUTIONS		NG PHARMACIST	
	Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	
	Other (specify)		229.32	
	Full Name (Last, First, Middle Initial) MR TIMOTHY TIDD	<b>'</b>		Date of Receipt
	Mailing Address 7974 FLAMETREE C	Т		12 29 29 2007
	City	State	Zip Code	Transaction ID: INC.A.43215
	LAS VEGAS	NV	89123	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer MEDCO HEALTH SOLUTIONS	Occupation VP/GM		
	Receipt For:	Aggregate	e Year-to-Date ▼	_
	Primary General Other (specify) ▼		1062.50	
	SUBTOTAL of Receipts This Page (optional)	1		79.41

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В.

PAGE 282/310 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) Full Name (Last, First, Middle Initial) MR HECTOR TORRES Date of Receipt Mailing Address 6023 HOMESTEAD COURT 29 12 2007 City State Zip Code Transaction ID: INC.A.43252 HILLIARD OH 43026 Amount of Each Receipt this Period FEC ID number of contributing 4.28 C federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation SUPV INVENTORY CONTROL Receipt For: Aggregate Year-to-Date Primary General 222.56 Other (specify) Full Name (Last, First, Middle Initial) MR CALVIN WASDYKE Date of Receipt Mailing Address 5 APPLE ORCHARD RD 29 2007 City State Zip Code Transaction ID: INC.A.43234 **MOORESTOWN** NJ 08057 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Name of Employer MEDCO HEALTH SOLUTIONS Occupation VP/GM Receipt For: Aggregate Year-to-Date ▼ Primary General

912.50

		54.29
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	54.28
TOTAL This Period (last page this line number only)	<b>•</b>	40340.69

Other (specify)

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SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 283 / 310 (check only one)  11a 11b 11c 12  13 14 15 16 17 17
Any information copied from such Reports and or for commercial purposes, other than using	d Statements ma the name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC	. POLITICAL /	ACTION COMMITTEE (a.k.a	. Medco Health PAC)
Full Name (Last, First, Middle Initial)  BANK OF MARIN  Mailing Address 50 MADERA BLVD.			Date of Receipt  1 2 3 1 2 0 0 7
City	State	Zip Code	Transaction ID: INC.A.43007
CORTE MADERA	CA	94925	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		109.78
Name of Employer	Occupatio	n	INTEREST EARNED
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.07	

SUPTOTAL of Possints This Page (entional)	109.78	
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number only)	109.78	ī

ITEMIZED DIODUDATESTA	Use separate schedule(s) (check c	NE NUMBER: PAGE 284 / 310 pnly one)
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page 21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
Any Information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.		solicit contributions from such committee
Full Name (Last, First, Middle Initial) BRADY FOR CONGRESS  Mailing Address P.O. BOX 8277		Transaction ID: EXP.B.41988 Date of Disbursement  1 2 1 3 7 2 0 0 7
City THE WOODLANDS Purpose of Disbursement	State Zip Code TX 77387	Amount of Each Disbursement this Period  1000.00
Candidate Name KEVIN BRADY	011 Category/ Type	
Office Sought:  X House  Senate  President  State: TX  District: 08	bursement For: 2008  X Primary General  Other (specify) ▼	
Full Name (Last, First, Middle Initial) DON PAYNE FOR CONGRESS  Mailing Address P.O. BOX 2406		Transaction ID: EXP.B.41993 Date of Disbursement  M 2 M / D 1 3 Y Y Y O 7 Y 2 0 0 7
City NEWARK Purpose of Disbursement	State Zip Code NJ 07114	Amount of Each Disbursement this Period  1000.00
Candidate Name DONALD M. PAYNE	011 Category/ Type	
Office Sought:  X House Senate President State: NJ District: 10	bursement For: 2008  X Primary General  Other (specify) ▼	
Full Name (Last, First, Middle Initial) LAUTENBERG FOR SENATE		Transaction ID: EXP.B.41992 Date of Disbursement
Mailing Address P.O. BOX 200596 RIVERFRONT PLAZ		1 2 M / D 1 3 / Y 2 0 0 7 Y
City NEWARK	State Zip Code NJ 07102	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement  Candidate Name FRANK R. LAUNTENBERG	011 Category/ Type	2500.00
Office Sought:  House  X Senate  President	bursement For: 2008  X Primary General  Other (specify) ▼	
State: NJ District:		

# SCHEDIII F B (FFC Form 3Y)

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LIN (check or	E NUMBER: PAGE 285 / 310
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 3
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam			
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMI	TTEE (a.k.a.	Medco Health PAC)
	Full Name (Last, First, Middle Initial) RED ROOSTER LEADERSHIP PAC  Mailing Address 228 S. WASHINGTON S	NT		Transaction ID: EXP.B.41987 Date of Disbursement  M M J D D J Z D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		· 		
	City ALEXANDRIA	State Zip Code VA 22314		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	2500.00
	Candidate Name GENERAL PURPOSE COMMITTEE		011 Category/ Type	
	Office Sought:    House   Disburse     Senate   President     State: District:	ement For: Primary General Other (specify)		
	Full Name (Last, First, Middle Initial) RYAN FOR CONGRESS			Transaction ID: EXP.B.41990 Date of Disbursement
	Mailing Address P.O. BOX 1919			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City JANESVILLE	State Zip Code WI 53547		Amount of Each Disbursement this Period
	Purpose of Disbursement  Candidate Name		011 Category/	1000.00
	PAUL D. RYAN	ement For: 2008	Type	
	Senate X President	Primary General Other (specify)		
	State: WI District: 01  Full Name (Last, First, Middle Initial)  CONGRESSMAN WAXMAN CAMPAIGN	COMMITTEE		Transaction ID: EXP.B.42034 Date of Disbursement
	Mailing Address 6380 WILSHIRE BLVD.,			M M / D D V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City LOS ANGELES	State Zip Code CA 90048		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	2000.00
	Candidate Name HENRY A. WAXMAN		Category/ Type	
	Senate X President	ement For: 2008 Primary General Other (specify)		
	State: CA District: 30			
s	UBTOTAL of Disbursements This Page (optional)	<u></u>	<b>&gt;</b>	5500.00
<b>-</b>	OTAL This Period (last page this line number only)			
L'	The raise choc (last page this line number only)	•••••		

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SCHEDULE B (FEC Form 3X)		FOR LINE N	NUMBER: PAGE 286/310
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
ITEMIZED DISBURSEMENTS	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMITT	ΓΕΕ (a.k.a. M	edco Health PAC)
Full Name (Last, First, Middle Initial)			Transaction ID: EXP.B.42035
JOHANNS VICTORY 2008 COMMITTEE			Date of Disbursement
Mailing Address P.O. BOX 80297			$\begin{bmatrix} \begin{smallmatrix} M \\ 12 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D \\ 17 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y \\ 2007 \end{smallmatrix} $
	State Zip Code NE 68501		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name MICHAEL O. JOHANNS		Category/ Type	
Office Sought: House $\chi$ Senate $\chi$ President	ment For: 2008 Primary General Other (specify)		
State: NE District:	• • • • •		

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	<b></b>	11000.00

SCHEDULE B (FEC Form TEMIZED DISBURSEMEN		TS Use separate for each categ		eparate schedule(s	FOR LIN			E NUMBER: nly one)				PAGE 287/310			
				category of the Summary Page		À	21b 27	22 28a	Н	23 28b	, F	24 28c	X	25 29	
ny Information copied r for commercial purpo															
NAME OF COMMI		ig the name		55 of any pointour	0011		00 10 00		tilbut	10110		30011	00111111	11100	
\	H SOLUTIONS IN	NC. POLIT	ICAL AC	CTION COMMIT	TTE	Έ (ε	a.k.a. I	Medco	Hea	lth F	PAC	)			
Full Name (Last, Fin									sact of D			XP.B. ent	4194	6	
Mailing Address	205 FAYETTEV	ILLE ST.,	STE. 30	0				1 <sup>M</sup> 2	M	/	0 7	/ [	ž	0 ŏ 7	Y
City RALEIGH			tate	Zip Code 27602				Amo	unt o	of Ea	ch D	isburse	ement	this P	eric
Purpose of Disburs	ement				Г	011		L					5	00.00	0
Candidate Name NON-FEDERAL	CONTRIBUTION	I			Ca	atego Type	ory/								
Office Sought:	House Senate President		nent For: Primary Other (spe	2008 General											
	District:		- (- -	<i>→</i> , <b>▼</b>											
Full Name (Last, Fi	. ,								of D	isbu	rsem		4192	9	
Mailing Address	1632 W. FIRST	AVE.						1 <sup>M</sup> 2	M	/ [	0 7	/ [	ž	0 ŏ 7	Y
City COLUMBUS			tate DH	Zip Code 43212				Amo	unt o	of Ea	ch D	isburse	ement	this P	eric
Purpose of Disburs	ement				Г	011		L					2	50.00	0
Candidate Name NON-FEDERAL	CONTRIBUTION	l			Ca	011 atego Type	ory/								
Office Sought:	House Senate President		nent For: Primary Other (spe	2008 General											
	District:			, <b>,</b>											
Full Name (Last, Fi	rst, Middle Initial) S FOR N.C. SEN	ATE							sact of D			XP.B. ent	4191	1	
Mailing Address	P.O. BOX 310							1 2	M	/ [	0 7		ž	0 ŏ 7	Y
City TARBORO			tate IC	Zip Code 27886				Amo	unt o	of Ea	ch D	isburse			
Purpose of Disburs	ement				Г	011		L					5	00.00	0
Candidate Name NON-FEDERAL	CONTRIBUTION	I			Ca	atego Type	ory/								
Office Sought:	House Senate President		nent For: Primary Other (spe	2008 General											
State: NC	District:		oniei (spe	<i>&gt;</i> ○y) ▼											
		_													

SCHEDOLL B (I LO I OHII SA)	(check only	NUMBER: PAGE 288/310 vone)						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30t					
Any Information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC.	name and address of any politica	committee to so	licit contributions from such committee					
Full Name (Last, First, Middle Initial) COLBY SCHWARTZ FOR STATE HO Mailing Address 12228 SW. 7TH CII		Transaction ID: EXP.B.41935 Date of Disbursement  M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City YUKON	State Zip Code OK 73099		Amount of Each Disbursement this Period					
Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type	500.00					
Office Sought:  Senate President State: OK  Diagram Diagram State: Diagram Diagram State: Diagram Diagram State: Diagram Diagram Senate President	bursement For: 2008 Primary X General Other (specify) ▼							
Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT HUGH HOL  Mailing Address 103 SAPONA RD.	LIMAN		Transaction ID: EXP.B.41921 Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City LEXINGTON Purpose of Disbursement Candidate Name	State Zip Code NC 27295	011 Category/	Amount of Each Disbursement this Period 500.00					
NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President  State: NC District:	bursement For: 2008  X Primary General Other (specify)	Туре						
Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT JEFF BARN	HART		Transaction ID: EXP.B.41916 Date of Disbursement					
Mailing Address P.O. BOX 246			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} $					
City CONCORD	State Zip Code NC 28026		Amount of Each Disbursement this Period					
Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type	250.00					
	bursement For: 2008  X Primary General Other (specify)	. , , pc						
SUBTOTAL of Disbursements This Page (opt	onal)	<b>&gt;</b>	1250.00					
TOTAL This Period (last page this line number	only)	<b>&gt;</b>						

# SCHEDIII F B (FFC Form 3Y)

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 289 / 310
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30l
Any Information copied from such Reports and Sta or for commercial purposes, other than using the n	tements may not be sold or used ame and address of any political	d by any person for committee to so	or the purpose of soliciting contributions licit contributions from such committee
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO	DLITICAL ACTION COMMI	TTEE (a.k.a. N	Nedco Health PAC)
Full Name (Last, First, Middle Initial)  COMMITTEE TO ELECT RICK GLAZIE	R		Transaction ID: EXP.B.41919 Date of Disbursement
Mailing Address 1200 MURCHISON R	D.		$\begin{bmatrix}\begin{smallmatrix}M&2&M\\1^M&2^M&\end{smallmatrix}\end{bmatrix}^\top \begin{bmatrix}\begin{smallmatrix}D&D&D\\0&7&\end{smallmatrix}\end{bmatrix}^\top \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&0&7\\\end{smallmatrix}\end{bmatrix}^Y$
City FAYETTEVILLE	State Zip Code NC 28301		Amount of Each Disbursement this Period
Purpose of Disbursement		011	250.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
Senate President	xsement For: 2008  X Primary General  Other (specify)		
State: NC District:  Full Name (Last, First, Middle Initial)			Transaction ID: EXP.B.41913
COMMITTEE TO RE-ELECT SENATOR	R TONY RAND COMMITTE	Ε	Date of Disbursement
Mailing Address 2008 LITHO PL.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
City FAYETTVILLE	State Zip Code NC 28304		Amount of Each Disbursement this Period
Purpose of Disbursement  Candidate Name		011 Category/	1000.00
NON-FEDERAL CONTRIBUTION		Type	
Office Sought: House Disbu	xsement For: 2008  X Primary General  Other (specify)		
Full Name (Last, First, Middle Initial)  COOPER FOR ATTORNEY GENERAL			Transaction ID: EXP.B.41907 Date of Disbursement
Mailing Address P.O. BOX 10587			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Q & Y \\ 2 & 0 & Q & 7 \end{smallmatrix} \end{bmatrix}$
City RALEIGH	State Zip Code NC 27603		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
Senate President	x Primary General Other (specify)		
State: NC District:			
SUBTOTAL of Disbursements This Page (option	al)	<u>\</u>	2250.00
TOTAL This Period (last page this line number of	nly)	<b>)</b>	

	Use separate schedule(s	(check on	= NUMBER: PAGE 290 / 310
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30
Any Information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. F	ame and address of any politica	al committee to se	olicit contributions from such committee
Full Name (Last, First, Middle Initial) COX FOR STATE REPRESENTATIVE  Mailing Address 33471 S. 595 RD.	2008		Transaction ID: EXP.B.41932 Date of Disbursement
City GROVE Purpose of Disbursement	State Zip Code OK 74344	I	Amount of Each Disbursement this Period 500.00
Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type	
Office Sought: House Dist Senate President State: OK District:	rsement For: 2008 Primary X General Other (specify) ▼		
Full Name (Last, First, Middle Initial) CRAWFORD COMMITTEE  Mailing Address 509 COLLEGE ST.			Transaction ID: EXP.B.41917 Date of Disbursement
City OXFORD Purpose of Disbursement Candidate Name	State Zip Code NC 27565	011 Category/	Amount of Each Disbursement this Period 500.00
NON-FEDERAL CONTRIBUTION	ursement For: 2008  X Primary General Other (specify) ▼	Type	
Full Name (Last, First, Middle Initial) DEBORAH ROSS FOR REPRESENTA	TIVE		Transaction ID: EXP.B.41924 Date of Disbursement  12
Mailing Address 425 S. BOYLAN ST.  City	State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement	NC 27603	011	250.00
Candidate Name NON-FEDERAL CONTRIBUTION	reament For: 2000	Category/ Type	-
Office Sought: House Dist Senate President	x Primary		
State: NC District:			

Any Information copied from such Reports and State or for commercial purposes, other than using the result of the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. Por Full Name (Last, First, Middle Initial)			22       23       24       25       26         28a       28b       28c       X       29       30         for the purpose of soliciting contributions
or for commercial purposes, other than using the r  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. PO			
Full Name (Last, First, Middle Initial)	LITICAL ACTION COMM	ITTEE (a.k.a.	
FRIENDS OF CHARLES CURTISS  Mailing Address 120 GENERAL JONE	S RD		Transaction ID: EXP.B.41943 Date of Disbursement  1 2 0 7 2 0 0 7
City SPARTA	State Zip Code TN 38583		Amount of Each Disbursement this Period
Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type	500.00
Office Sought: House Senate President State: TN District:	rsement For: 2008  X Primary General  Other (specify)		
Full Name (Last, First, Middle Initial) FRIENDS OF CRAIG FITZHUGH  Mailing Address 135 S. ALPINE ST.			Transaction ID: EXP.B.41944 Date of Disbursement  12
City RIPLEY Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION	State Zip Code TN 38063	011 Category/	Amount of Each Disbursement this Period 500.00
	rsement For: 2008  X Primary General Other (specify)	Туре	
Full Name (Last, First, Middle Initial) FRIENDS OF HEARD			Transaction ID: EXP.B.41930 Date of Disbursement
Mailing Address 2603 BURNABY DR.  City	State Zip Code		Amount of Each Disbursement this Period
COLUMBUS Purpose of Disbursement	OH 43209	011	250.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
Office Sought: House Senate President State: OH District:	rsement For: 2008  X Primary General  Other (specify)		
SUBTOTAL of Disbursements This Page (option	(ls	<b>&gt;</b>	1250.00

	CHEDOLE B (I LO I OHII 3X)	Use separate schedule(s)	_	LINE NUMBER: PAGE 292 / 310 K only one)
T	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21	b 22 23 24 25 26
	ny Information copied from such Reports and Statem for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLI	e and address of any political	committee t	to solicit contributions from such committee
<u>/_</u> <b>A</b> .	Full Name (Last, First, Middle Initial) FRIENDS OF JIM KYLE	1050		Transaction ID: EXP.B.41938 Date of Disbursement
	Mailing Address 100 PEABODY PL., STE	. 1250 State Zip Code		Amount of Each Disbursement this Period
	MEMPHIS	TN 38103		
	Purpose of Disbursement  Candidate Name		011 Category/	1000.00
	NON-FEDERAL CONTRIBUTION  Office Sought: House Senate X President  State: TN District:	ement For: 2008 Primary General Other (specify)	Type	
3.	Full Name (Last, First, Middle Initial) FRIENDS OF JIMMY NAIFEH  Mailing Address P.O. BOX 97			Transaction ID: EXP.B.41945 Date of Disbursement
	City COVINGTON Purpose of Disbursement	State Zip Code TN 38019	0 0	Amount of Each Disbursement this Period
	Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type	
	• 🗎 –	ment For: 2008 Primary General Other (specify)		
D.	Full Name (Last, First, Middle Initial) FRIENDS OF JOE ARMSTRONG			Transaction ID: EXP.B.41942 Date of Disbursement
	Mailing Address 4708 HILLDALE DR.			M M / D D / Y Y Y O Y Y
	City KNOXVILLE	State Zip Code TN 37914		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	500.00
	Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
		ement For: 2008 Primary General Other (specify)		
[	SUBTOTAL of Disbursements This Page (optional)			3000.00
	<b>FOTAL</b> This Period (last page this line number only)			<b>•</b>

S	CHEDULE B (FEC Form 3X)	Use separate schedule(s)			NUMBER:	PA	GE 293/	310
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		check only 21b 27	22 23 28a 28		25 X 29	26 30
	ny Information copied from such Reports and Statem for commercial purposes, other than using the nam							
	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMI	TTEE	(a.k.a. N	Medco Health	PAC)		
<b>A</b> .	Full Name (Last, First, Middle Initial) FRIENDS OF KEN MILLER 2008				Transaction Date of Disbu	ursement		V
	Mailing Address P.O. BOX 7161				12 /	077	2 0 0 7	
	City EDMOND	State Zip Code OK 73083			Amount of Ea	ach Disburse		
	Purpose of Disbursement		01	11			500.0	0
	Candidate Name NON-FEDERAL CONTRIBUTION		Cate Ty	egory/ rpe				
	Senate President	ement For: 2008 Primary X General Other (specify)						
_	Full Name (Last, First, Middle Initial)				Transaction	ID: EXP.B.	41939	
3.	FRIENDS OF RANDY MCNALLY				Date of Disbu	ursement	Ž 0 Ŏ 7	, Υ
	Mailing Address 94 ROYAL TROON RD.				1 2	0 7	2007	
	City OAK RIDGE	State Zip Code TN 37830			Amount of Ea	ach Disburse		
	Purpose of Disbursement  Candidate Name		01	11			500.0	0
	NON-FEDERAL CONTRIBUTION		Ту	· ,				
	9 🗎	ement For: 2010 Primary General Other (specify)						
÷.	Full Name (Last, First, Middle Initial) FRIENDS OF RON RAMSEY				Transaction Date of Disbu	ursement		
	Mailing Address 3311 HWY. 126				12	07	ž 0 ŏ 7	· *
	City BLOUNTVILLE	State Zip Code TN 37617			Amount of Ea	ach Disburse	ment this F	Period
	Purpose of Disbursement		01	11			1500.0	0
	Candidate Name NON-FEDERAL CONTRIBUTION		Cate Ty	egory/ rpe				
	Senate X President	ement For: 2008 Primary General Other (specify)						
	State: TN District:						2500.0	0
	SUBTOTAL of Disbursements This Page (optional)					• • •		-
Ι'	<b>OTAL</b> This Period (last page this line number only)							

SCHEDULE B (FEC Form ( TEMIZED DISBURSEMEN	' Use separate schedule	(check onl	ENUMBER: PAGE 294 / 310 y one) 22 23 24 25
ny Information copied from such Reports a		27	28a 28b 28c X 29
r for commercial purposes, other than usin			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL ACTION COM	MITTEE (a.k.a. I	Medco Health PAC)
Full Name (Last, First, Middle Initial) FRIENDS OF RUSTY CROWE			Transaction ID: EXP.B.41937 Date of Disbursement
Mailing Address 808 E. 8TH AVE			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City JOHNSON CITY	State Zip Code TN 37601	_	Amount of Each Disbursement this Period
Purpose of Disbursement		011	500.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
Office Sought: House Senate President	Disbursement For: 2010  X Primary General Other (specify)	al	
State: TN District:			
Full Name (Last, First, Middle Initial) FRIENDS OF STEVE SOUTHER	_AND		Transaction ID: EXP.B.41948 Date of Disbursement
Mailing Address 4648 HARBOR	DR.		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City MORRISTOWN	State Zip Code TN 37814		Amount of Each Disbursement this Peri
Purpose of Disbursement		011	500.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/	
Office Sought: House Senate President	Disbursement For: 2010  X Primary General Other (specify)	al	
State: TN District:			
Full Name (Last, First, Middle Initial) HARTSELL - STATE SENATOR (	COMMITTEE		Transaction ID: EXP.B.41910 Date of Disbursement
Mailing Address P.O. BOX 368			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City CONCORD	State Zip Code NC 27856		Amount of Each Disbursement this Peri
Purpose of Disbursement		011	250.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
Office Sought: House Senate President	Disbursement For: 2008  X Primary General Other (specify)		
State: NC District:	(oboon)) <b>\</b>		

SCHEDOLL B (I LO I OHII SX)	Use separate schedule(s)	(check or	E NUMBER: PAGE 295 / 310
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30
Any Information copied from such Reports and State or for commercial purposes, other than using the result of the NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. Policy of the Name of Communication (In Full)	ame and address of any political	committee to s	olicit contributions from such committee
Full Name (Last, First, Middle Initial) JACKSON FOR HOUSE SEAT 40 2008 Mailing Address 2906 CELLAR DOOR	LN.		Transaction ID: EXP.B.41947 Date of Disbursement
City ENID	State Zip Code OK 73703		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement  Candidate Name  NON-FEDERAL CONTRIBUTION		011 Category/ Type	300.00
Office Sought: House Disb Senate President State: OK District:	rsement For: 2008 Primary X General Other (specify) ▼		
Full Name (Last, First, Middle Initial) JOE HACKNEY FOR HOUSE COMMIT  Mailing Address P.O. BOX 1329	ΓΕΕ		Transaction ID: EXP.B.41920 Date of Disbursement  12
City CHAPEL HILL Purpose of Disbursement  Candidate Name	State Zip Code NC 27514	011 Category/	Amount of Each Disbursement this Period 1000.00
NON-FEDERAL CONTRIBUTION  Office Sought: House Disb Senate President State: NC District:	rsement For: 2008  X Primary General Other (specify)	Туре	
Full Name (Last, First, Middle Initial) KENTUCKY HOUSE DEMOCRATIC Co	UCUS CAMPAIGN COMM	ITTEE	Transaction ID: EXP.B.41906 Date of Disbursement
Mailing Address P.O. BOX 694  City	State Zip Code		Amount of Each Disbursement this Period
FRANKFORT Purpose of Disbursement	KY 40604	011	1000.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
	rsement For: Primary General		
Senate President State: KY District:	Other (specify)		

CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	) FOR LIN (check or	E NUMBER: PAGE 296 / 310
EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 2 28a 28b 28c X 29 3
y Information copied from such Reports and State for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POL			
Full Name (Last, First, Middle Initial) KENTUCKY SENATE REPUBLICAN CAL Mailing Address P.O. BOX 1068	CUS CAMPAIGN COMM	MITTEE	Transaction ID: EXP.B.41905 Date of Disbursement  M M / D D / Y Y Y O Y 7 Y Y O Y 7 Y Y O Y O T Y O T O T O T O T O T O T O
City FRANKFORT	State Zip Code KY 40602		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: KY District:  Full Name (Last, First, Middle Initial)  MARC BASNIGHT COMMITTEE			Transaction ID: EXP.B.41908 Date of Disbursement
Mailing Address 220 HILLSBOROUGH S	Т.		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City RALEIGH	State Zip Code NC 27603		Amount of Each Disbursement this Period
Purpose of Disbursement  Candidate Name		011 Category/	1000.00
NON-FEDERAL CONTRIBUTION		Type	
• 🗎 –	ement For: 2008 Primary General Other (specify)		
Full Name (Last, First, Middle Initial) NORTH CAROLINA REPUBLICAN SENA	TE COMMITTEE		Transaction ID: EXP.B.41926 Date of Disbursement
Mailing Address 1506 HILLSBOROUGH	ST.		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City RALEIGH	State Zip Code NC 27603		Amount of Each Disbursement this Period
Purpose of Disbursement  Candidate Name		011	500.00
NON-FEDERAL CONTRIBUTION		Category/ Type	
Office Sought: House Disburs	ement For:	•	
Senate President State: NC District:	Primary General Other (specify) ▼		

Tremation copied from such Reports and Statements may not be sold or used by any person for the purpose of Soliciting committee for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee for for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee for for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  Amy Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting committee for solicit contributions from such committee.  Amy Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting committee.  Mallog Address Solution (Inc. 12)  MEDOO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medoc Health PAC)  OWENS FOR N.C. HOUSE  Making Address P.O. BOX 537  Gity State To Code ELIZABETH CITY NC 27907  Purpose of Disbursement (Inc. 27907)  Purpose of Disbursement (Inc. 27907)  Purpose of Disbursement (Inc. 27907)  Transaction ID: EXP.B.41923  Date of Disbursement ID: EXP.B.41909  Date of Disbursement ID: EXP.B.41909  Date of Disbursement ID: EXP.B.41909  Date of Disbursement ID: EXP.B.41918  Date of Disbursement ID: EXP.B.		CHEDULE B (FEC FORM 3X)	Use sepa	rate schedule(s)	FOR LIN	NE NUMBER: PAGE 297 / 3° only one)
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee  NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC)  Full Name (Last, First, Middle Initial)  OWENS FOR N.C. HOUSE  Mailing Address P.O. BOX 537  City State Zip Code ELIZABETH CITY N.C. 27907  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President  Full Name (Last, First, Middle Initial) PHIL BERGER COMMITTEE  Mailing Address 311 PINEWOOD PL.  City State Zip Code EDEN N.C. 27289  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President  State: NC District:  Full Name (Last, First, Middle Initial) PRYOR GIBSON GOOD GOVERNMENT COMMITTEE  Mailing Address P.O. BOX 1010  City State Zip Code EDEN N.C. 27289  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President  State: NC District:  Mailing Address P.O. BOX 1010  City State Zip Code President  State: NC District:  Mailing Address P.O. BOX 1010  City State Zip Code President  State: NC District:  Mailing Address P.O. BOX 1010  City State Zip Code NC 28170  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President  State: NC District:  SUBTOTAL of Disbursements This Page (optional)  Disbursement For: 2008  X Primary General President  State: NC District:  SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)			Detailed S	Summary Page	27	28a 28b 28c X 29
Mailing Address P.O. BOX 537  City State Zip Code ELIZABETH CITY NC 27907  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President Sound of Disbursement For: 2008  EDEN State Zip Code NC 27289  Purpose of Disbursement  Candidate Name NoN-FEDERAL CONTRIBUTION  Office Sought: House Senate NC 27289  Purpose of Disbursement  Candidate Name NoN-FEDERAL CONTRIBUTION  Office Sought: House Senate NC 27289  Purpose of Disbursement  Candidate Name NoN-FEDERAL CONTRIBUTION  Office Sought: House Senate NC 27289  Purpose of Disbursement  Candidate Name NoN-FEDERAL CONTRIBUTION  Office Sought: House Senate President Senate President Senate NC District:  Full Name (Last, First, Middel initial)  PRYOR GIBSON GOOD GOVERNMENT COMMITTEE  Mailing Address P.O. BOX 1010  City WADESBORO NC 28170  Purpose of Disbursement  Candidate Name NoN-FEDERAL CONTRIBUTION  Office Sought: House Senate President Senate Other (specify) ▼  Transaction ID: EXP.B.41918  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41918  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41918  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41918  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41918  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41918  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41918  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41918  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41918  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41909  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41909  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41918  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41909  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41909  Amount of Each Disbursement this Period Type  Transaction ID: EXP.B.41909  Amount of Each Disbursement		or commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	ne and addres	ss of any political	committee to s	solicit contributions from such committee
ELIZABETH CITY Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: NC District:  Full Name (Last, First, Middle Initial) Purpose of Disbursement  Category' NON-FEDERAL CONTRIBUTION  Office Sought: House President State: NC District:  State: NC District:  Full Name (Last, First, Middle Initial) Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: NC District:  Full Name (Last, First, Middle Initial) PRYOR GIBSON GOOD GOVERNMENT COMMITTEE  Mailing Address P.O. BOX 1010  City WADESBORO NC State Zip Code Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: NC District:  Full Name (Last, First, Middle Initial) PRYOR GIBSON GOOD GOVERNMENT COMMITTEE  Mailing Address P.O. BOX 1010  City WADESBORO NC State Zip Code WADESBORO NC 28170  Purpose of Disbursement  Category' Type  Office Sought: House Senate NC 28170  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate NC 28170  Purpose of Disbursement  Category' Type  Transaction ID: EXP.B.41918  Date of Disbursement For: 2008  Amount of Each Disbursement For: 2008  X Primary General Category' Type  Total This Period (last page this line number only)  Total This Period (last page this line number only)	<u>V</u>	OWENS FOR N.C. HOUSE				Date of Disbursement
Candidate Name NON-FEDERAL CONTRIBUTION Office Sought: House Senate President State: NC District:  Full Name (Last, First, Middel Initial) PUTPOR GIBSON GOOD GOVERNMENT COMMITTEE  Mailing Address P.O. BOX 1010  City Senate Non-FEDERAL CONTRIBUTION Office Sought: House Senate President State: NC District:  Full Name (Last, First, Middel Initial) PUTPORS of Disbursement  Other (specify) ▼  Transaction ID: EXP.B.41909 Date of Disbursement  In 2		ELIZABETH CITY				
Senate President Other (specify) ▼  State: NC District:  Full Name (Last, First, Middle Initial) PHIL BERGER COMMITTEE  Mailing Address 311 PINEWOOD PL.  City State Zip Code EDEN NC 27289  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: NC District:  Full Name (Last, First, Middle Initial) PRYOR GIBSON GOOD GOVERNMENT COMMITTEE  Mailing Address P.O. BOX 1010  City State Zip Code NC 27289  Frumary General Other (specify) ▼  Transaction ID: EXP.B.41909 Date of Disbursement this Period of Disbursement This Page (optional) Total This Period (last page this line number only)		Candidate Name			Category/	300.00
PHIL BERGER COMMITTEE  Mailing Address 311 PINEWOOD PL.  City State Zip Code NC 27289  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: NC District:  Full Name (Last, First, Middle Initial) PRYOR GIBSON GOOD GOVERNMENT COMMITTEE  Mailing Address P.O. BOX 1010  City State Zip Code NC 28170  Purpose of Disbursement  Other (specify) ▼  Amount of Each Disbursement this Perion Solo.00  Transaction ID: EXP.B.41918 Date of Disbursement  To 0 7 / Y 2 0 0 7		Senate X President	Primary	General		
City State Zip Code NC 27289  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President House State: NC District:  Full Name (Last, First, Middle Initial) PRYOR GIBSON GOOD GOVERNMENT COMMITTEE  Mailing Address P.O. BOX 1010  City State Zip Code WADESBORO NC 28170  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State Zip Code WADESBORO NC 28170  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President Senate Other (specify) ▼  State: NC District: 1011  Category/ Type  Disbursement For: 2008  X Primary General Other (specify) ▼  State: NC District: 1500.00  TOTAL This Period (last page this line number only)		,				Date of Disbursement
EDEN NC 27289  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: NC District:  Full Name (Last, First, Middle Initial) PRYOR GIBSON GOOD GOVERNMENT COMMITTEE  Mailing Address P.O. BOX 1010  City WADESBORO NC 28170  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President Senate NC District:  State: NC District: 1011  Transaction ID: EXP.B.41918 Date of Disbursement  Mailing Address P.O. BOX 1010  City WADESBORO NC 28170  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President Senate President State: NC District: 1500.00  State: NC District: 1500.00  TOTAL This Period (last page this line number only)		Mailing Address 311 PINEWOOD PL.				1 2 0 7 2 2007
Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President State: NC District:  Full Name (Last, First, Middle Initial) PRYOR GIBSON GOOD GOVERNMENT COMMITTEE  Mailing Address P.O. BOX 1010  City State Zip Code WADESBORO NC 28170  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House President Senate President Senate President Senate President State: NC District:  SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)  Disbursement For: 2008  X Primary General Other (specify) ▼  1500.00						Amount of Each Disbursement this Per
State: NC District:  Full Name (Last, First, Middle Initial) PRYOR GIBSON GOOD GOVERNMENT COMMITTEE  Mailing Address P.O. BOX 1010  City State Zip Code WADESBORO NC 28170  Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION Office Sought: House Senate President State: NC District:  SUBTOTAL of Disbursements This Page (optional)  Transaction ID: EXP.B.41918 Date of Disbursement  1 2 M		Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Disburs Senate X	Primary	General	Category/	500.00
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WADESBORO Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President President State: NC District:  SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)			COMMITT			
Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President President State: NC District:  SUBTOTAL of Disbursements This Page (optional)		WADESBORO				
Senate		Candidate Name NON-FEDERAL CONTRIBUTION			Category/	300.00
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<b>∠</b> <b>A</b> .	Full Name (Last, First, Middle Initial) PURCELL FOR N.C. SENATE COMMITTE  Mailing Address 1301 DUNBAR DR.	EE					of Disb	ID: EXurseme	ent		2 0 ŏ 7	Y
		State Zip Code NC 28352				Amou	nt of E	ach Dis	burse		this P	
	Candidate Name NON-FEDERAL CONTRIBUTION		Ca	01 <sup>-</sup> ateg Typ	ory/			•				
	· -	ement For: 2008 Primary General Other (specify)										
В.	Full Name (Last, First, Middle Initial) R.C. SOLES JR. FOR SENATE  Mailing Address P.O. BOX 6					Date o		ID: EXurseme			4 0 ŏ 7	Y
	,	State Zip Code NC 28463		01	l ory/	Amou	nt of Ea	ach Dis	sburse		this P	
	NON-FEDERAL CONTRIBUTION  Office Sought: House Disburse	ement For: 2008 Primary General Other (specify)		Тур	,							
С.	Full Name (Last, First, Middle Initial) RED HARLOW PAC					Date o		ID: EX				V
	Mailing Address 517 NW. 22ND ST.					1 2		0 7	Ľ		0 ŏ 7	
	OKLAHOMA CITY	State Zip Code OK 73103				Amou	nt of E	ach Dis	burse		this P	-
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	r Information copied from such Reports and State or commercial purposes, other than using the na				
L	NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. PO				
,	Full Name (Last, First, Middle Initial) SENATE DEMOCRATIC COMMITTEE				Transaction ID: EXP.B.41928 Date of Disbursement
	Mailing Address 220 HILLSBOROUGH	ST.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 0 \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 \end{smallmatrix} 7 \end{smallmatrix} \end{bmatrix}$
	City RALEIGH	State NC	Zip Code 27603		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	1000.00
	Candidate Name NON-FEDERAL CONTRIBUTION Office Sought: House Disbut	rsement For:		Category/ Type	
	Senate President State: NC District:	Primary Other (spe	General ecify) ▼		
	Full Name (Last, First, Middle Initial) SWINDELL FOR SENATE COMMITTEE	<u> </u>			Transaction ID: EXP.B.41915 Date of Disbursement
	Mailing Address 700 BIRCHWOOD DR		$\begin{bmatrix}\begin{smallmatrix}M\\1\\2\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\1\\2\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}D\\1\\2\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}Y\\1\\2\end{smallmatrix}\end{bmatrix} \begin{bmatrix}\begin{smallmatrix}Y\\1\\2\end{smallmatrix}\end{bmatrix} \begin{bmatrix}\begin{smallmatrix}Y\\1\\2\end{smallmatrix}\end{bmatrix} \begin{bmatrix}Y\\1\\2\end{smallmatrix}$		
	City NASHVILLE	State NC	Zip Code 27856		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	250.00
	Candidate Name			Category/	
	NON-FEDERAL CANDIDATE			Type	
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	NON-FEDERAL CANDIDATE  Office Sought: House Senate Disbut	X Primary	General	Туре	Transaction ID: EXP.B.41922 Date of Disbursement
	NON-FEDERAL CANDIDATE  Office Sought: House Senate President  State: NC District:  Full Name (Last, First, Middle Initial)	X Primary	General	Туре	
	NON-FEDERAL CANDIDATE  Office Sought: House Senate President  State: NC District:  Full Name (Last, First, Middle Initial)  THE EARL JONES CAMPAIGN	X Primary	General	Туре	Date of Disbursement  M 2 M / D 0 7 / Y 2 0 0 7 Y  Amount of Each Disbursement this Perio
	NON-FEDERAL CANDIDATE  Office Sought: House Senate President State: NC District:  Full Name (Last, First, Middle Initial) THE EARL JONES CAMPAIGN  Mailing Address 21 LONEY CIR.  City GREENSBORO  Purpose of Disbursement	X Primary Other (spe	General ecify) ▼  Zip Code	011	Date of Disbursement
	NON-FEDERAL CANDIDATE  Office Sought: House Senate President State: NC District:  Full Name (Last, First, Middle Initial) THE EARL JONES CAMPAIGN  Mailing Address 21 LONEY CIR.  City GREENSBORO	X Primary Other (spe	General ecify) ▼  Zip Code		Date of Disbursement  M 2 M / D 0 7 / Y 2 0 0 7 Y  Amount of Each Disbursement this Period
	NON-FEDERAL CANDIDATE  Office Sought: House Senate President State: NC District:  Full Name (Last, First, Middle Initial) THE EARL JONES CAMPAIGN  Mailing Address 21 LONEY CIR.  City GREENSBORO Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Disbur	X Primary Other (spe	General ecify)   Zip Code 27406  2008 General	011 Category/	Date of Disbursement  M 2 M / D 0 7 / Y 2 0 0 7  Amount of Each Disbursement this Period

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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30
Any Information copied from such Reports and State or for commercial purposes, other than using the name of NAME OF COMMITTEE (In Full)  MEDCO HEALTH SOLUTIONS INC. Po	ame and address of any politica	al committee to s	olicit contributions from such committee
Full Name (Last, First, Middle Initial) THE REPUBLICAN HOUSE MAJORITY Mailing Address 1506 HILLSBOROUG			Transaction ID: EXP.B.41927 Date of Disbursement
City RALEIGH	State Zip Code NC 27603	1	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Disbu	rsement For:	011 Category/ Type	
Senate President State: NC District:  Full Name (Last, First, Middle Initial)	Primary General Other (specify) ▼		T ID EVP D 44004
TODD LAMB FOR STATE SENATE 20  Mailing Address 2300 N. LINCOLN BL			Transaction ID: EXP.B.41931 Date of Disbursement  M M M D D D Y Y Y O Y Y Y O Y Y Y Y Y Y Y Y Y
9	State Zip Code OK 73150	011 Category/ Type	Amount of Each Disbursement this Period  500.00
Senate President State: OK District:	Primary X General Other (specify) ▼		
Full Name (Last, First, Middle Initial) WAINWRIGHT FOR N.C. HOUSE  Mailing Address P.O. BOX 33			Transaction ID: EXP.B.41925 Date of Disbursement
City HAVELOCK	State Zip Code NC 28532		Amount of Each Disbursement this Period 500.00
Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION		011 Category/ Type	
Senate	rsement For: 2008  X Primary General Other (specify)	1	
State: NC District:			

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NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. POI	LITICAL ACTION COMM	TTEE (a.k.a. N	Medco Health PAC)
Full Name (Last, First, Middle Initial) CAROL ROESSLER COMMITTEE			Transaction ID: EXP.B.42041 Date of Disbursement
Mailing Address 1506 JACKSON ST.			1 2 2 7 2 0 0 7
City	State Zip Code		Amount of Each Disbursement this Period
OŚHKOSH	WI 54901	_	500.00
Purpose of Disbursement			300.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
Senate 2	sement For: 2010  C Primary General  Other (specify)		
State: WI District: 18  Full Name (Last, First, Middle Initial)			Transaction ID: EXP.B.42040
JOE LEIBHAM COMMITTEE			Date of Disbursement
Mailing Address 3618 RIVER RIDGE DF	R.		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} & / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 7 \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
City SHEBOYGAN	State Zip Code WI 53083		Amount of Each Disbursement this Period
Purpose of Disbursement			500.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
	sement For: 2010  K Primary General  Other (specify)		
Full Name (Last, First, Middle Initial) TED KANAVAS COMMITTEE			Transaction ID: EXP.B.42039 Date of Disbursement
Mailing Address P.O. BOX 427			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
City BROOKFIELD	State Zip Code WI 53008		Amount of Each Disbursement this Period
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Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
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ITEMIZED DISBURSI	Detailed S	category of the Summary Page	21b 27	22 23 23 28b	24 25 26 28c X 29 30
Any Information copied from such or for commercial purposes, other NAME OF COMMITTEE (In IMEDICO HEALTH SOLUTION)	than using the name and address	ss of any political co	ommittee to s	olicit contributions fro	m such committee
Full Name (Last, First, Middle ASSEMBLY REPUBLICA Mailing Address P.O. BO	N VICTORY '07			Transaction ID: Date of Disburse	ment
City SKILLMAN Purpose of Disbursement	State NJ	Zip Code 08558		Amount of Each	Disbursement this Period
Candidate Name NON-FEDERAL CONTR			011 Category/ Type		
Office Sought: House Senate Presid State: NJ District:	Primary	General cify) ▼			
Full Name (Last, First, Middle BARRETT FOR REPRES Mailing Address 354 GC	,			Transaction ID: Date of Disburse	ment
City AMHERST Purpose of Disbursement Candidate Name	State OH	Zip Code 44001	011 Category/	Amount of Each	Disbursement this Period 250.00
NON-FEDERAL CONTR  Office Sought: House Senate Presid  State: OH District:	Disbursement For:  X Primary	2008 General	Type		
Full Name (Last, First, Middle BATCHELDER FOR REF	Initial) PRESENTATIVE COMMITTI	EE		Transaction ID: Date of Disburse	ment
City MEDINA	State OH	Zip Code 44256			Disbursement this Period
Purpose of Disbursement  Candidate Name  NON-FEDERAL CONTRI	RUTION		011 Category/	<u> </u>	250.00
Office Sought: House	Disbursement For:  X Primary	2008 General	Туре	-	
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	y Information copied from such Reports and Statem or commercial purposes, other than using the name NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. POLI	e and address of any politica	l com	mitt	ee to soli	cit contr	ibutio	ns fror	n such			
V <b>A</b> .	Full Name (Last, First, Middle Initial) COMMITTEE FOR JIM HUGHES  Mailing Address 14 E. GAY ST., 2ND FL.						of Dis	n ID: E burser			51 0 0 7	Y
	City COLUMBUS Purpose of Disbursement	State Zip Code OH 43215				Amou	nt of I	Each [	Disburs		t this P	
	Candidate Name NON-FEDERAL CONTRIBUTION		Ca	01 ateg Typ	ory/							
		ement For: 2008 Primary General Other (specify)										
В.	Full Name (Last, First, Middle Initial) COMMITTEE FOR LARRY FLOWERS  Mailing Address 14 E. GAY ST., 2ND FLO	DOR				Date o		n ID: E burser			59 0 ŏ 7	Y
	,	State Zip Code OH 43215		01	1	Amou	nt of I	Each [	Disburs		t this P	
	Candidate Name NON-FEDERAL CONTRIBUTION		Ca	ateg Typ	ory/							
		ement For: 2008 Primary General Other (specify)										
 C.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT CLIFF HITE					Date o		burser				V
	Mailing Address 2417 WESTMOOR RD.					1 2	,	2 8	8 ′	2	0 ŏ 7	
	FINDLAY	State Zip Code OH 45840				Amou	nt of I	Each [	Disburs		t this P	
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	st, First, Middle Initial) E TO ELECT LYNN V		ANN					Trans Date		sburs			2066 Ž 0 Ŏ	7 <sup>Y</sup>
City NAPOLEON			State OH	Zip Code 43545				Amou	nt of	Each	Disb	ursem	ent this	
Candidate Na NON-FEDE Office Sought	me RAL CONTRIBUTION	Disbursen	nent For: Primary Other (spe	2008 General	Ca	01 <sup>-</sup> ateg Typ	ory/		•	•	•	٠		
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City NEW RICH Purpose of Di			State OH	Zip Code 45157				Amou	nt of	Each	Disb	ursem	nent this	
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Office Sought	: House Senate President District:		nent For: Primary Other (spe	2008 General										
,	st, First, Middle Initial) ART FOR STATE RE	EPRESENT	TATIVE					Trans	of Di	sburs	ement		2063	
Mailing Addre	ss 363 DEMORES	ST RD.						1 <sup>M</sup> 2	M	D 2	2 8	Y	žoŏ	7 <sup>Y</sup>
City COLUMBUS			State OH	Zip Code 43204				Amou	nt of	Each	Disb	ursem	nent this	
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	ny Information copied from such Reports and Statem for commercial purposes, other than using the name			
-	NAME OF COMMITTEE (In Full)			
	MEDCO HEALTH SOLUTIONS INC. POLI	TICAL ACTION COMMI	TTEE (a.k.a. N	Medco Health PAC)
A.	Full Name (Last, First, Middle Initial)	0144		Transaction ID: EXP.B.42046
Λ.	DEMOCRATIC ASSEMBLY CAMPAIGN C	OMMITTEE		Date of Disbursement
	Mailing Address P.O. BOX 3712			1 2 M / D 2 B / Y 2 0 0 7 Y
	,	State Zip Code NJ 08629		Amount of Each Disbursement this Period
	Purpose of Disbursement			1500.00
	Candidate Name		011 Category/	
	NON-FEDERAL CONTRIBUTION		Type	
	Office Sought: House Disburse Senate	ement For:  Primary General		
	President	Other (specify)		
_	State: NJ District:	- ·		
В.	Full Name (Last, First, Middle Initial) FRIENDS OF ARMOND BUDISH			Transaction ID: EXP.B.42056
				Date of Disbursement
	Mailing Address 23240 CHAGRIN BLVD.	BLDG. 4, STE.		1 2 M / D 2 B / Y Y Y O O 7 Y
	City BEACHWOOD	State Zip Code OH 44122		Amount of Each Disbursement this Period
	Purpose of Disbursement	71122		250.00
	O and Palata Name		011	
	Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
	· -	ment For: 2008		
	Senate X President	Primary General Other (specify) ▼		
	State: OH District:	Curior (openity)		
C.	Full Name (Last, First, Middle Initial) FRIENDS OF BILL COLEY			Transaction ID: EXP.B.42057 Date of Disbursement
	Mailing Address 8265 CHERRY LAUREL	DR.		$\begin{bmatrix}\begin{smallmatrix}M&2&M\\1^2&2&8\end{smallmatrix}\end{bmatrix}^{\prime}\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2^2&0&0^2&7\end{smallmatrix}\end{bmatrix}^{\prime}$
	City MIDDLETOWN	State Zip Code OH 45044		Amount of Each Disbursement this Period
	Purpose of Disbursement	011 +504+		250.00
			011	
	Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
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NAME OF COMMITTEE (In Full)								
MEDCO HEALTH SOLUTIONS INC. P	OLITICAL ACTION CO	MMITTEE	(a.k.a. N	1edco H	ealth PA	AC)		
Full Name (Last, First, Middle Initial) FRIENDS OF FABER					action ID	: EXP.B	.42050	
Mailing Address 7706 STATE RTE. 70	)3			1 2		2 8	žoŏ7	7 <sup>Y</sup>
City	State Zip Code			Amoui	nt of Fach	n Disburs	ement this f	Period
CELINA	OH 45822			7 111001	it of Each	Diobaro		
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Candidate Name NON-FEDERAL CONTRIBUTION			egory/ ype					
Office Sought: House Disk Senate President State: OH District:	oursement For: 2008  X Primary Ger  Other (specify) ▼	8 neral						
Full Name (Last, First, Middle Initial) FRIENDS OF MATT SZOLLOSI				Date c	f Disburs			V
Mailing Address 3166 N. REPUBLIC I	BLVD.			12	M / D	28	žoŏ7	7
City TOLEDO	State Zip Code OH 43615	<del>,</del>		Amoui	nt of Each	n Disburs	ement this I	Period
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Candidate Name NON-FEDERAL CONTRIBUTION		Cat	tegory/					
Office Sought: House Disk Senate President State: OH District:	wursement For: 2008  X Primary Ge  Other (specify)	8 neral						
Full Name (Last, First, Middle Initial) FRIENDS OF SHANNON JONES				Date o	f Disburs			
Mailing Address 800 VALLEY VIEW F	POINT			12	M / D	28	žoŏ7	7
City SPRINGBORO	State Zip Code OH 45066	)		Amoui	nt of Each	n Disburs	ement this f	Period
Purpose of Disbursement			011	L.			250.0	0
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TOTAL This Period (last page this line number	only)		•					

	Use separate schedule(s	)   FOR LINE (check only	NUMBER: PAGE 307/310 vone)
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 2 28a 28b 28c x 29 3
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full)			
MEDCO HEALTH SOLUTIONS INC. POL	ITICAL ACTION COMMI	ITTEE (a.k.a. N	Medco Health PAC)
Full Name (Last, First, Middle Initial) FRIENDS OF TIMOTHY J. DEGEETER			Transaction ID: EXP.B.42058 Date of Disbursement
			1 2 2 8 2 0 0 7
Mailing Address 5580 RIDGE RD.			
City PARMA	State Zip Code OH 44129		Amount of Each Disbursement this Period
Purpose of Disbursement		011	250.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/	
	sement For: 2008	Туре	
Senate President	C Primary General Other (specify) ▼		
State: OH District:			
Full Name (Last, First, Middle Initial) FRIENDS OF TODD EACHUS			Transaction ID: EXP.B.42067 Date of Disbursement
			1 2 2 8 2 0 0 7
Mailing Address P.O. BOX 2174			12 20 2007
City HAZLETON	State Zip Code PA 18201		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
Office Sought: House Disburs Senate President	ement For: 2008 Primary X General Other (specify)		
State: PA District:			
Full Name (Last, First, Middle Initial) JIMMY STEWART FOR STATE REPRES	ENTATIVE		Transaction ID: EXP.B.42065 Date of Disbursement
Mailing Address 477 RICHLAND AVE.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 1 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 8 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$
City ATHENS	State Zip Code OH 45701		Amount of Each Disbursement this Period
Purpose of Disbursement		011	250.00
Candidate Name NON-FEDERAL CONTRIBUTION		Category/ Type	
Senate President	ement For: 2008  Primary General Other (specify)		
State: OH District:			
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	1500.00
TOTAL This Period (last page this line number only	·)		

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SCHEDOLL B (I LC I OHH SX)	Use separate schedule(s) (check	INE NUMBER: PAGE 308 / 310 only one)
ITEMIZED DISBURSEMENTS	Detailed Summary Page 21b	22 23 24 25 26 28a 28b 28c X 29 30
Any Information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) MEDCO HEALTH SOLUTIONS INC. P	ame and address of any political committee to	o solicit contributions from such committee
Full Name (Last, First, Middle Initial) MATT HUFFMAN FOR STATE REPRE Mailing Address 2220 MERIT DR.	SENTATIVE	Transaction ID: EXP.B.42061 Date of Disbursement  12  28  20 0 7
City LIMA	State Zip Code OH 45805	Amount of Each Disbursement this Period 250.00
Purpose of Disbursement  Candidate Name NON-FEDERAL CONTRIBUTION	011 Category/ Type	230.00
Office Sought: House Disb Senate President State: OH District:	rsement For: 2008  X Primary General  Other (specify) ▼	
Full Name (Last, First, Middle Initial) SEITZ FOR STATE REPRESENTATIV Mailing Address 4401 ABBY CT.	≣	Transaction ID: EXP.B.42053 Date of Disbursement  12
City CINCINNATI Purpose of Disbursement	State Zip Code OH 45248	Amount of Each Disbursement this Period 250.00
Candidate Name NON-FEDERAL CONTRIBUTION  Office Sought: House Senate President  State: OH District:	Category/ Type  Irsement For: 2008  X Primary General  Other (specify)	
Full Name (Last, First, Middle Initial) SENATE DEMOCRATIC MAJORITY		Transaction ID: EXP.B.42047 Date of Disbursement  12
Mailing Address 196 WEST STATE S  City	State Zip Code	1 2 2 8 2 0 0 7  Amount of Each Disbursement this Period
TRENTON Purpose of Disbursement	NJ 08608	1500.00
Candidate Name NON-FEDERAL CONTRIBUTION	Category/ Type	1
Office Sought: House Dist	rsement For:  Primary  General  Other (specify) ▼	
State: NJ President  State: NJ District:	cale. (epoolity) 🔻	

	001	JEDIU E D /EEO E	· · · · · · · · · · · · · · · · · · ·								
	SCHEDULE B (FEC Form 3X)			eparate schedule(s)		NUMBER:	PAGE 309/310				
	ITEMIZED DISBURSEMENTS		for each	h category of the	(Crieck only	<u> </u>					
			Detaile	ed Summary Page	21b 27	22 23 28a 28b	24 25 26 28c x 29 30b				
	Anyth	nformation copied from such Reports a	and Statements may	rnot ha gold or upor							
		commercial purposes, other than usin									
	N	IAME OF COMMITTEE (In Full)									
	) N	MEDCO HEALTH SOLUTIONS IN	IC. POLITICAL A	ACTION COMMI	TTEE (a.k.a. N	Medco Health PA	AC)				
	F	ull Name (Last, First, Middle Initial)				Transaction ID:	: EXP.B.42048				
Α.	S	SENATE REPUBLICAN MAJORIT	ΓΥ			Date of Disburs					
	_					1 2 D	28 2007				
	IV	lailing Address 370 TALL TREE	CT.			12 2	2007				
		ity	State	Zip Code		Amount of Each	Disbursement this Period				
	J.	ACKSON	NJ	08527							
	Р	urpose of Disbursement					1000.00				
	_				011						
		andidate Name ION-FEDERAL CONTRIBUTION			Category/ Type						
	_	Office Sought: House	Disbursement For		туре						
	O	Senate	Primary								
		President		pecify)							
	S	tate: NJ District:	(	, , , , , , , , , , , , , , , , , , ,							
	F	ull Name (Last, First, Middle Initial)				Transaction ID	EXP.B.42049				
В.	Т	EAM COUGHLIN				Date of Disburs					
	_					M M / D	28 2007				
	M	failing Address 2324 IOTA AVE				1"2" 2	2007				
		ity	State	Zip Code		Amount of Each	Disbursement this Period				
	С	CUYAHOGA FALLS	OH	44223							
	Р	urpose of Disbursement					250.00				
	_				011						
		andidate Name ION-FEDERAL CONTRIBUTION			Category/ Type						
	0	Office Sought: House	Disbursement For	I : 2010	. 76-2						
	Ū	Senate	X Primary								
		President	Other (s	necify) 🔻							

SUBTOTAL of Disbursements This Page (optional)	•	1250.00
TOTAL This Period (last page this line number only)	•	37250.00

State: OH

District:

**DEBTS AND OBLIGATIONS** 

(Use separate schedule(s) for each numbered line)

PAGE 310 / 310 FOR LINE NUMBER: (check only one) 9

X 10

Excluding Loans	
NAME OF COMMITTEE (In Full)	

MEDCO HEALTH SOLUTIONS INC. POLITICAL ACTION COMMITTEE (a.k.a. Medco Health PAC) A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): NIELSEN, MERKSAMER, PARRINELLO, MUELLER, & NAYLOR, LLP **LEGAL SERVICES** Mailing Address 591 REDWOOD HIGHWAY., BLDG. 4000 ZIP Code City State MILL VALLEY CA 94941 Outstanding Balance Beginning This Period Transaction ID: PAY:D:42033 2026.50 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 2026.50

1) SUBTOTALS This Period This Page (optional)	▶ 2026.50
2) TOTALS This Period (last page this line number only)	▶ 2026.50
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶ 0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	2026.50