

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEES PAC

ADDRESS (number and street) 311 BONNIE CIRCLE  
 Check if different than previously reported. (ACC)  
CORONA CA 92880

2. **FEC IDENTIFICATION NUMBER** C00391086  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2010 through 03 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Robert Joyce

Signature of Treasurer Electronically Filed by Robert Joyce Date 04 15 2010

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 Use Only							
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC

Report Covering the Period: From:    To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <input type="text" value="2010"/>		41926.16
(b) Cash on Hand at Beginning of Reporting Period .....	41926.16	
(c) Total Receipts (from Line 19) .....	13693.00	13693.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	55619.16	55619.16
7. Total Disbursements (from Line 31) .....	4000.00	4000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	51619.16	51619.16
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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**

Write or Type Committee Name

WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC

Report Covering the Period: From:    To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	10550.00	10550.00
(ii) Unitemized .....	3143.00	3143.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	13693.00	13693.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	13693.00	13693.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(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)) .....	13693.00	13693.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	13693.00	13693.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	4000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. 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 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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4000.00	4000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4000.00	4000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	13693.00	13693.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13693.00	13693.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 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)  
WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Boyer Andrew		Date of Receipt
	Mailing Address 14 St Malo Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Pinebrook	NJ	07058
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.5705
Name of Employer Watson Pharmaceuticals, Inc.		Occupation Sr. VP - Sales and Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 75.00
		<input type="text"/> 225.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Boyer Andrew		Date of Receipt
	Mailing Address 14 St Malo Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Pinebrook	NJ	07058
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.5706
Name of Employer Watson Pharmaceuticals, Inc.		Occupation Sr. VP - Sales and Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 75.00
		<input type="text"/> 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Boyer Andrew		Date of Receipt
	Mailing Address 14 St Malo Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Pinebrook	NJ	07058
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.5707
Name of Employer Watson Pharmaceuticals, Inc.		Occupation Sr. VP - Sales and Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 75.00
		<input type="text"/> 375.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 225.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Boyer Andrew		Date of Receipt MM / DD / YYYY 03 / 26 / 2010		
	Mailing Address 14 St Malo Dr		<b>Transaction ID:</b> SA11AI.5708		
	City Pinebrook	State NJ	Zip Code 07058	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Watson Pharmaceuticals, Inc.		Occupation Sr. VP - Sales and Marketing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Paul M Bisaro		Date of Receipt MM / DD / YYYY 01 / 25 / 2010		
	Mailing Address 121 Old Oak Road		<b>Transaction ID:</b> SA11AI.5835		
	City Warwick	State NY	Zip Code 10990	Amount of Each Receipt this Period 5000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Watson Pharmaceuticals, Inc.		Occupation CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) David A Buchen		Date of Receipt MM / DD / YYYY 02 / 12 / 2010		
	Mailing Address 1967 La France Ave.		<b>Transaction ID:</b> SA11AI.5718		
	City South Pasadena	State CA	Zip Code 91030	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Watson Pharmaceuticals, Inc.		Occupation Sr. VP, General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5150.00
<b>TOTAL</b> 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: (check only one)	PAGE 8 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) David A Buchen		Date of Receipt MM / DD / YYYY 02 / 26 / 2010	
	Mailing Address 1967 La France Ave.		<b>Transaction ID:</b> SA11AI.5719	
	City	State	Zip Code	Amount of Each Receipt this Period
	South Pasadena	CA	91030	75.00
	FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Watson Pharmaceuticals, Inc.		Occupation Sr. VP, General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) David A Buchen		Date of Receipt MM / DD / YYYY 03 / 12 / 2010	
	Mailing Address 1967 La France Ave.		<b>Transaction ID:</b> SA11AI.5720	
	City	State	Zip Code	Amount of Each Receipt this Period
	South Pasadena	CA	91030	75.00
	FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Watson Pharmaceuticals, Inc.		Occupation Sr. VP, General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) David A Buchen		Date of Receipt MM / DD / YYYY 03 / 26 / 2010	
	Mailing Address 1967 La France Ave.		<b>Transaction ID:</b> SA11AI.5721	
	City	State	Zip Code	Amount of Each Receipt this Period
	South Pasadena	CA	91030	75.00
	FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Watson Pharmaceuticals, Inc.		Occupation Sr. VP, General Counsel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>225.00</b>
<b>TOTAL</b> 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 9 / 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC**

**A.**

Full Name (Last, First, Middle Initial)  
I-Fan Chen

Mailing Address 980 S. Grinnell St

City State Zip Code  
**Anaheim CA 92807**

FEC ID number of contributing federal political committee. C

Name of Employer  
Watson Pharmaceuticals, Inc.

Occupation  
Director, Information Tech

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
03 / 26 / 2010

**Transaction ID: SA11AI.5729**

Amount of Each Receipt this Period  
35.00

**B.**

Full Name (Last, First, Middle Initial)  
Charles D Ebert

Mailing Address 1912 E Lakewood Dr

City State Zip Code  
**Salt Lake City UT 84117**

FEC ID number of contributing federal political committee. C

Name of Employer  
Watson Pharmaceuticals, Inc.

Occupation  
Sr VP, R&D

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
02 / 12 / 2010

**Transaction ID: SA11AI.5732**

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Charles D Ebert

Mailing Address 1912 E Lakewood Dr

City State Zip Code  
**Salt Lake City UT 84117**

FEC ID number of contributing federal political committee. C

Name of Employer  
Watson Pharmaceuticals, Inc.

Occupation  
Sr VP, R&D

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
02 / 26 / 2010

**Transaction ID: SA11AI.5733**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... 235.00

**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: (check only one)	PAGE 10 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) Charles D Ebert	Date of Receipt MM / DD / YYYY 03 / 12 / 2010
	Mailing Address 1912 E Lakewood Dr	<b>Transaction ID:</b> SA11AI.5734
	City State Zip Code Salt Lake City UT 84117	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Watson Pharmaceuticals, Inc. Occupation Sr VP, R&D Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Charles D Ebert	Date of Receipt MM / DD / YYYY 03 / 26 / 2010
	Mailing Address 1912 E Lakewood Dr	<b>Transaction ID:</b> SA11AI.5735
	City State Zip Code Salt Lake City UT 84117	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Watson Pharmaceuticals, Inc. Occupation Sr VP, R&D Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Fedida	Date of Receipt MM / DD / YYYY 02 / 28 / 2010
	Mailing Address 824 Hemlock Court	<b>Transaction ID:</b> SA11AI.5839
	City State Zip Code Norwood NJ 07648	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> 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 11 / 20  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Giordano

Mailing Address 621 Solar Isle Dr.

City State Zip Code  
Ft Lauderdale FL 33301

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Watson Pharmaceuticals, Inc.

Occupation  
Sr. VP - Chief Information Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
MM / DD / YYYY  
02 / 26 / 2010

**Transaction ID:** SA11AI.5751

Amount of Each Receipt this Period  
60.00

**B.**

Full Name (Last, First, Middle Initial)  
Thomas Giordano

Mailing Address 621 Solar Isle Dr.

City State Zip Code  
Ft Lauderdale FL 33301

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Watson Pharmaceuticals, Inc.

Occupation  
Sr. VP - Chief Information Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
03 / 12 / 2010

**Transaction ID:** SA11AI.5752

Amount of Each Receipt this Period  
60.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Giordano

Mailing Address 621 Solar Isle Dr.

City State Zip Code  
Ft Lauderdale FL 33301

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Watson Pharmaceuticals, Inc.

Occupation  
Sr. VP - Chief Information Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2010

**Transaction ID:** SA11AI.5753

Amount of Each Receipt this Period  
60.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **180.00**

**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 12 / 20  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC

**A.**

Full Name (Last, First, Middle Initial)  
Edward Heimers

Mailing Address 14 Melbourne Wy

City Basking Ridge State NJ Zip Code 07920

FEC ID number of contributing federal political committee. **C**

Name of Employer Watson Pharmaceuticals, Inc. Occupation President, Brand Division

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt 01 / 29 / 2010

Transaction ID: SA11AI.5755

Amount of Each Receipt this Period 190.00

**B.**

Full Name (Last, First, Middle Initial)  
Edward Heimers

Mailing Address 14 Melbourne Wy

City Basking Ridge State NJ Zip Code 07920

FEC ID number of contributing federal political committee. **C**

Name of Employer Watson Pharmaceuticals, Inc. Occupation President, Brand Division

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 570.00

Date of Receipt 02 / 12 / 2010

Transaction ID: SA11AI.5756

Amount of Each Receipt this Period 190.00

**C.**

Full Name (Last, First, Middle Initial)  
Edward Heimers

Mailing Address 14 Melbourne Wy

City Basking Ridge State NJ Zip Code 07920

FEC ID number of contributing federal political committee. **C**

Name of Employer Watson Pharmaceuticals, Inc. Occupation President, Brand Division

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt 02 / 26 / 2010

Transaction ID: SA11AI.5757

Amount of Each Receipt this Period 190.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 570.00

**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: (check only one)	PAGE 13 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Edward Heimers		Date of Receipt
	Mailing Address 14 Melbourne Wy		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 12 / 2010
	City	State	Zip Code
	Basking Ridge	NJ	07920
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5760
Name of Employer Watson Pharmaceuticals, Inc.		Occupation President, Brand Division	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 950.00	<input type="text"/> 190.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Edward Heimers		Date of Receipt
	Mailing Address 14 Melbourne Wy		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 26 / 2010
	City	State	Zip Code
	Basking Ridge	NJ	07920
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5761
Name of Employer Watson Pharmaceuticals, Inc.		Occupation President, Brand Division	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1140.00	<input type="text"/> 190.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Robert Joyce		Date of Receipt
	Mailing Address 4785 Stirlingbridge Circle		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 26 / 2010
	City	State	Zip Code
	Yorba Linda	CA	92887
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5767
Name of Employer Watson Pharmaceuticals, Inc.		Occupation Sr VP and CFO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 420.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 20  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) George T Long</p> <p>Mailing Address 3501 N 22nd St</p> <hr/> <p>City State Zip Code Arlington VA 22207</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Watson Pharmaceuticals, Inc.</p> <p>Occupation VP, Gov't Affairs</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">240.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 2 / 2 6 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> SA11AI.5784</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">60.00</span></p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) George T Long</p> <p>Mailing Address 3501 N 22nd St</p> <hr/> <p>City State Zip Code Arlington VA 22207</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Watson Pharmaceuticals, Inc.</p> <p>Occupation VP, Gov't Affairs</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 3 / 1 2 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> SA11AI.5785</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">60.00</span></p>
--	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) George T Long</p> <p>Mailing Address 3501 N 22nd St</p> <hr/> <p>City State Zip Code Arlington VA 22207</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Watson Pharmaceuticals, Inc.</p> <p>Occupation VP, Gov't Affairs</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">360.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 3 / 2 6 / 2 0 1 0</span></p> <p><b>Transaction ID:</b> SA11AI.5786</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">60.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">180.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Charles Mark Mayr	Date of Receipt MM / DD / YYYY 02 / 12 / 2010
	Mailing Address 721 Midwood Road	<b>Transaction ID:</b> SA11AI.5789
	City State Zip Code Ridgewood NJ 07450	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Watson Pharmaceuticals, Inc. Occupation Sr. Vice President, Corporate Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Charles Mark Mayr	Date of Receipt MM / DD / YYYY 02 / 26 / 2010
	Mailing Address 721 Midwood Road	<b>Transaction ID:</b> SA11AI.5790
	City State Zip Code Ridgewood NJ 07450	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Watson Pharmaceuticals, Inc. Occupation Sr. Vice President, Corporate Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Charles Mark Mayr	Date of Receipt MM / DD / YYYY 03 / 12 / 2010
	Mailing Address 721 Midwood Road	<b>Transaction ID:</b> SA11AI.5791
	City State Zip Code Ridgewood NJ 07450	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Watson Pharmaceuticals, Inc. Occupation Sr. Vice President, Corporate Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	300.00
<b>TOTAL</b> 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 16 / 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC**

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Charles Mark Mayr

Mailing Address 721 Midwood Road

City State Zip Code  
Ridgewood NJ 07450

FEC ID number of contributing federal political committee. C

Name of Employer  
Watson Pharmaceuticals, Inc.

Occupation  
Sr. Vice President, Corporate Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	1	0

**Transaction ID:** SA11AI.5792

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Albert Paonessa

Mailing Address 9852 NW 2 Court

City State Zip Code  
Plantation FL 33324

FEC ID number of contributing federal political committee. C

Name of Employer  
Watson Pharmaceuticals, Inc.

Occupation  
President - VIP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	1	0

**Transaction ID:** SA11AI.5800

Amount of Each Receipt this Period  
125.00

**C.**

Full Name (Last, First, Middle Initial)  
Albert Paonessa

Mailing Address 9852 NW 2 Court

City State Zip Code  
Plantation FL 33324

FEC ID number of contributing federal political committee. C

Name of Employer  
Watson Pharmaceuticals, Inc.

Occupation  
President - VIP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	2		2	0	1	0

**Transaction ID:** SA11AI.5801

Amount of Each Receipt this Period  
125.00

**SUBTOTAL** of Receipts This Page (optional) ..... 350.00

**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: (check only one)	PAGE 17 / 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) Albert Paonessa		Date of Receipt MM / DD / YYYY 02 / 26 / 2010		
	Mailing Address 9852 NW 2 Court		<b>Transaction ID:</b> SA11AI.5802		
	City Plantation	State FL	Zip Code 33324	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Watson Pharmaceuticals, Inc.		Occupation President - VIP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Albert Paonessa		Date of Receipt MM / DD / YYYY 03 / 12 / 2010		
	Mailing Address 9852 NW 2 Court		<b>Transaction ID:</b> SA11AI.5803		
	City Plantation	State FL	Zip Code 33324	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Watson Pharmaceuticals, Inc.		Occupation President - VIP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 625.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Albert Paonessa		Date of Receipt MM / DD / YYYY 03 / 26 / 2010		
	Mailing Address 9852 NW 2 Court		<b>Transaction ID:</b> SA11AI.5804		
	City Plantation	State FL	Zip Code 33324	Amount of Each Receipt this Period 125.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Watson Pharmaceuticals, Inc.		Occupation President - VIP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>375.00</b>
<b>TOTAL</b> 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: (check only one)	PAGE 18 / 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Theresa A Paonessa		Date of Receipt	
	Mailing Address 5128 Woodland Dr		M M / D D / Y Y Y Y Y 03 / 04 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.5816
	Lewiston	NY	14092	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer Watson Pharmaceuticals, Inc.		Occupation VP, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		225.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Theresa A Paonessa		Date of Receipt	
	Mailing Address 5128 Woodland Dr		M M / D D / Y Y Y Y Y 03 / 11 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.5813
	Lewiston	NY	14092	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer Watson Pharmaceuticals, Inc.		Occupation VP, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Theresa A Paonessa		Date of Receipt	
	Mailing Address 5128 Woodland Dr		M M / D D / Y Y Y Y Y 03 / 18 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.5814
	Lewiston	NY	14092	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.00	
Name of Employer Watson Pharmaceuticals, Inc.		Occupation VP, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> 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 19 / 20  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC

**A.** Full Name (Last, First, Middle Initial)  
Theresa A Paonessa

Mailing Address 5128 Woodland Dr

City State Zip Code  
Lewiston NY 14092

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Watson Pharmaceuticals, Inc.

Occupation  
VP, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2010

**Transaction ID:** SA11AI.5815

Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
Jeff Regan

Mailing Address 9 Carol Road

City State Zip Code  
Kinnelon NJ 07405

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Watson Pharmaceuticals, Inc.

Occupation  
VP, Materials

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2010

**Transaction ID:** SA11AI.5822

Amount of Each Receipt this Period  
40.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Andrew L Turner

Mailing Address 4121 W. DRAVUS STREET

City State Zip Code  
SEATTLE WA 98199

FEC ID number of contributing federal political committee. **C**

Name of Employer

Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 25 / 2010

**Transaction ID:** SA11AI.5838

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1065.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	10550.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

WATSON PHARMACEUTICALS INC EMPLOYEES POLITICAL ACTION COMMITTEE AKA WATSON EMPLOYEE PAC

<b>A.</b> Full Name (Last, First, Middle Initial) GENERIC PHARMACEUTICAL ASSOCIATION POLITICAL ACTION COMMITTEE Mailing Address 2300 Clarendon Boulevard Suite 400 City Arlington State VA Zip Code 22201 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5849 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) KEN CALVERT FOR CONGRESS Mailing Address PO Box 20123 City Riverside State CA Zip Code 92516 Purpose of Disbursement Candidate Name KENNETH S MR. CALVERT Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 44 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5850 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS Mailing Address PO BOX 3176 City Long Branch State NJ Zip Code 07740 Purpose of Disbursement Candidate Name FRANK JR. PALLONE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5852 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4000.00

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

4000.00