

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.
TEVA PAC

ADDRESS (number and street)
 Check if different than previously reported. (ACC)
 -

2. **FEC IDENTIFICATION NUMBER** **CITY** **STATE** **ZIP CODE**
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 Year-End 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 (12S)
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 / / through / /

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 Deborah Alice Griffin

Signature of Treasurer Deborah Alice Griffin [Electronically Filed] 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

TEVA 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="2014"/>	<input type="text" value="51946.78"/>	<input type="text" value="51946.78"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="64207.03"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="19310.51"/>	<input type="text" value="60245.87"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="83517.54"/>	<input type="text" value="112192.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="29500.00"/>	<input type="text" value="58175.11"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="54017.54"/>	<input type="text" value="54017.54"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

TEVA 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).....	10356.06	17155.18
(ii) Unitemized	8954.45	43090.69
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	19310.51	60245.87
(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)	19310.51	60245.87
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 Transfers (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))..... ▶	19310.51	60245.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	19310.51	60245.87

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	675.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	675.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28500.00	55500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	1000.00	2000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	29500.00	58175.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29500.00	58175.11

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

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)	19310.51	60245.87
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19310.51	60245.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	675.11
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	675.11

**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 OF 56
	<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	

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)
TEVA PAC

A. John Michael Abt
Full Name (Last, First, Middle Initial)

Mailing Address 425 Privet Road

City Horsham State PA Zip Code 19044

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

Name of Employer Teva Pharmaceuticals Occupation VP, Quality

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : ABA69B3470EDA4DD3B04

Amount of Each Receipt this Period
200.00

B. Fred Andrush
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Road
P.O. Box 1090

City North Wales State PA Zip Code 19454-1505

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

Name of Employer Teva Pharmaceuticals Occupation Assoc Dir, Mktg Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : AD2BFD212FE5A45BF91C

Amount of Each Receipt this Period
50.00

C. Fred Andrush
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Road
P.O. Box 1090

City North Wales State PA Zip Code 19454-1505

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

Name of Employer Teva Pharmaceuticals Occupation Assoc Dir, Mktg Ops

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2014

Transaction ID : A39C4BF701640462AA7C

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 7 OF 56
	<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Fred Andrush		Date of Receipt
Mailing Address 1090 Horsham Road P.O. Box 1090		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
North Wales	PA	19454-1505
FEC ID number of contributing federal political committee.		Transaction ID : AE56AD4434CD643E4A9D
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Teva Pharmaceuticals	Assoc Dir, Mktg Ops	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="550.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Renee Barnes		Date of Receipt
Mailing Address 1090 Horsham Rd.		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
North Wales	PA	19454-1505
FEC ID number of contributing federal political committee.		Transaction ID : A92D34EDADF0E453FA01
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="20.00"/>
Name of Employer	Occupation	
Teva Pharmaceuticals	Sr Oncology Account Spec	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="220.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Debra Suzanne Barrett		Date of Receipt
Mailing Address 25 Massachusetts Avenue, NW Suite 440		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20001
FEC ID number of contributing federal political committee.		Transaction ID : ADFAA018B8D8544C09EE
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
Teva Pharmaceuticals	SVP, Global Gov Aff & Pub Pol	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="220.00"/>
TOTAL 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 8 OF 56
	<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Debra Suzanne Barrett		Date of Receipt
Mailing Address 25 Massachusetts Avenue, NW Suite 440		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A25A645F560A44056B96
Name of Employer	Occupation	Amount of Each Receipt this Period
Teva Pharmaceuticals	SVP, Global Gov Aff & Pub Pol	<input type="text" value="1500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1500.00"/>	

Full Name (Last, First, Middle Initial) B. Debra Suzanne Barrett		Date of Receipt
Mailing Address 25 Massachusetts Avenue, NW Suite 440		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A91997B98A52E4236A2A
Name of Employer	Occupation	Amount of Each Receipt this Period
Teva Pharmaceuticals	SVP, Global Gov Aff & Pub Pol	<input type="text" value="150.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1650.00"/>	

Full Name (Last, First, Middle Initial) C. Denise Ann Bradley		Date of Receipt
Mailing Address 1090 Horsham Road P.O. Box 1090		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
North Wales	PA	19454-1505
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AE46219FFE02F45248B2
Name of Employer	Occupation	Amount of Each Receipt this Period
Teva Pharmaceuticals	VP, Corporate Communications	<input type="text" value="38.50"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="346.50"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="338.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 9 OF 56
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEVA PAC

A. Denise Ann Bradley
 Full Name (Last, First, Middle Initial)
 Mailing Address 1090 Horsham Road
 P.O. Box 1090
 City North Wales State PA Zip Code 19454-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Teva Pharmaceuticals Occupation VP, Corporate Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : AD867A0917D304A6F8BA
 Amount of Each Receipt this Period
 38.50

B. Denise Ann Bradley
 Full Name (Last, First, Middle Initial)
 Mailing Address 1090 Horsham Road
 P.O. Box 1090
 City North Wales State PA Zip Code 19454-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Teva Pharmaceuticals Occupation VP, Corporate Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 423.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : A6148474C2EF342F0A61
 Amount of Each Receipt this Period
 38.50

C. William A Campbell
 Full Name (Last, First, Middle Initial)
 Mailing Address 41 Moores Rd
 City Frazer State PA Zip Code 19355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Teva Pharmaceuticals Occupation GM Teva Oncology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2014
Transaction ID : AB74B83654D4D4B71A69
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 127.00
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 OF 56
	<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. William A Campbell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 16 / 2014
Mailing Address 41 Moores Rd		Transaction ID : AC7422FA1305A4C7A934
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Teva Pharmaceuticals	Occupation GM Teva Oncology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. William A Campbell		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 30 / 2014
Mailing Address 41 Moores Rd		Transaction ID : A4397A10E1B9149ACB61
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer Teva Pharmaceuticals	Occupation GM Teva Oncology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) C. Christopher Carney		Date of Receipt M M M / D D D / Y Y Y Y Y Y 05 / 02 / 2014
Mailing Address 41 Moores Rd		Transaction ID : AFDA81EB69B9442FEA99
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer Teva Pharmaceuticals	Occupation VP, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

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: (check only one)	PAGE 11 OF 56
<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Christopher Carney		Date of Receipt MM / DD / YYYY 05 / 16 / 2014 Transaction ID : A2DBD8954E3784AF5B67
Mailing Address 41 Moores Rd		Amount of Each Receipt this Period 250.00
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation VP, Sales
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Christopher Carney		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : ABDDBE485B8A8498D921
Mailing Address 41 Moores Rd		Amount of Each Receipt this Period 25.00
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation VP, Sales
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. Nolan N Castillo		Date of Receipt MM / DD / YYYY 05 / 02 / 2014 Transaction ID : A1AD5CFA917AB418C9FD
Mailing Address 41 Moores Rd		Amount of Each Receipt this Period 25.00
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation Mgr, Brand Mktg
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

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: (check only one)	PAGE 12 OF 56
<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)
TEVA PAC

A. Nolan N Castillo
Full Name (Last, First, Middle Initial)
Mailing Address 41 Moores Rd
City Frazer State PA Zip Code 19355
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation Mgr, Brand Mktg
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
05 / 16 / 2014
Transaction ID : A2F579610778749AAB00
Amount of Each Receipt this Period
250.00

B. Nolan N Castillo
Full Name (Last, First, Middle Initial)
Mailing Address 41 Moores Rd
City Frazer State PA Zip Code 19355
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation Mgr, Brand Mktg
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt
05 / 30 / 2014
Transaction ID : A7492285C116F404B84C
Amount of Each Receipt this Period
25.00

C. Maureen M Cavanaugh
Full Name (Last, First, Middle Initial)
Mailing Address 1090 Horsham Road P.O. Box 1090
City North Wales State PA Zip Code 19454-1505
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation SVP, US Generics Sales & Mktg
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt
05 / 02 / 2014
Transaction ID : A9EB6A3C6D78443568BF
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 13 OF 56
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Maureen M Cavanaugh		Date of Receipt
Mailing Address 1090 Horsham Road P.O. Box 1090		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : ABD4A828EFCDD743C5ADE
Name of Employer Teva Pharmaceuticals	Occupation SVP, US Generics Sales & Mktg	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" value="100.00"/>
	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) B. Maureen M Cavanaugh		Date of Receipt
Mailing Address 1090 Horsham Road P.O. Box 1090		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A4AA8BAB2961A478FBC3
Name of Employer Teva Pharmaceuticals	Occupation SVP, US Generics Sales & Mktg	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" value="100.00"/>
	<input type="text" value="1100.00"/>	

Full Name (Last, First, Middle Initial) C. Mahesh Chudasama		Date of Receipt
Mailing Address 8-10 Gloria Lane		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Fairfield	State NJ	Zip Code 07006
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : ACFEDC28112FF4A408AF
Name of Employer Teva Pharmaceuticals	Occupation Sr Dir, Quality	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" value="20.00"/>
	<input type="text" value="220.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="220.00"/>
TOTAL 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 14 OF 56
	<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)
TEVA PAC

A. Cecilia M Ciarlo
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City	State	Zip Code
North Wales	PA	19454-1505

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

Name of Employer	Occupation
Teva Pharmaceuticals	Sr Exec Sales Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

Transaction ID : A3A650EA136ED42919F1

Amount of Each Receipt this Period

25.00

B. Cecilia M Ciarlo
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City	State	Zip Code
North Wales	PA	19454-1505

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

Name of Employer	Occupation
Teva Pharmaceuticals	Sr Exec Sales Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : A40687DF9C4914D9E806

Amount of Each Receipt this Period

25.00

C. Cecilia M Ciarlo
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City	State	Zip Code
North Wales	PA	19454-1505

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

Name of Employer	Occupation
Teva Pharmaceuticals	Sr Exec Sales Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : A27F54F3AA8A64514AEF

Amount of Each Receipt this Period

25.00

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: (check only one)	PAGE 15 OF 56
	<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)
TEVA PAC

A. Jonathan P Congleton
Full Name (Last, First, Middle Initial)

Mailing Address 41 Moores Rd

City Frazer	State PA	Zip Code 19355
----------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation SVP & Head Global CNS
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

Transaction ID : A3AE27163A0F4F1D9C2

Amount of Each Receipt this Period

100.00

B. Jonathan P Congleton
Full Name (Last, First, Middle Initial)

Mailing Address 41 Moores Rd

City Frazer	State PA	Zip Code 19355
----------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation SVP & Head Global CNS
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : A2FB261ED544846B5A43

Amount of Each Receipt this Period

100.00

C. Jonathan P Congleton
Full Name (Last, First, Middle Initial)

Mailing Address 41 Moores Rd

City Frazer	State PA	Zip Code 19355
----------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation SVP & Head Global CNS
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1100.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : AC38ED320DE0A4B64B75

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 16 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Heather M Conner-Garofalo		Date of Receipt MM / DD / YYYY 05 / 02 / 2014 Transaction ID : A7966E27F8352445A91F
Mailing Address 1090 Horsham Road P.O. Box 1090		Amount of Each Receipt this Period 25.00
City North Wales	State PA	
Zip Code 19454-1505		Aggregate Year-to-Date ▼ 225.00
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation Dir, Customs Compliance	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Heather M Conner-Garofalo		Date of Receipt MM / DD / YYYY 05 / 16 / 2014 Transaction ID : A5934BECBE47B4C9D89D
Mailing Address 1090 Horsham Road P.O. Box 1090		Amount of Each Receipt this Period 25.00
City North Wales	State PA	
Zip Code 19454-1505		Aggregate Year-to-Date ▼ 250.00
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation Dir, Customs Compliance	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Heather M Conner-Garofalo		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : AF93F2FB47F35426A9BF
Mailing Address 1090 Horsham Road P.O. Box 1090		Amount of Each Receipt this Period 25.00
City North Wales	State PA	
Zip Code 19454-1505		Aggregate Year-to-Date ▼ 275.00
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation Dir, Customs Compliance	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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: (check only one)	PAGE 17 OF 56
<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)
TEVA PAC

A. Michael Duane Dearborn
Full Name (Last, First, Middle Initial)

Mailing Address 425 Privet Road

City Horsham State PA Zip Code 19044

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

Name of Employer Teva Pharmaceuticals Occupation SVP, Global Compliance Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt **05 / 02 / 2014**

Transaction ID : A1A9D88604F7C4DF5B88

Amount of Each Receipt this Period **60.00**

B. Michael Duane Dearborn
Full Name (Last, First, Middle Initial)

Mailing Address 425 Privet Road

City Horsham State PA Zip Code 19044

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

Name of Employer Teva Pharmaceuticals Occupation SVP, Global Compliance Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **05 / 16 / 2014**

Transaction ID : AF331A964CD3F4843BCB

Amount of Each Receipt this Period **60.00**

C. Michael Duane Dearborn
Full Name (Last, First, Middle Initial)

Mailing Address 425 Privet Road

City Horsham State PA Zip Code 19044

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

Name of Employer Teva Pharmaceuticals Occupation SVP, Global Compliance Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt **05 / 30 / 2014**

Transaction ID : A703B9D1223B24A9EA90

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: (check only one)	PAGE 18 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Michael M Derkacz		Date of Receipt MM / DD / YYYY 05 / 02 / 2014 Transaction ID : A6CEFF46D2B7D43F0BDE
Mailing Address 41 Moores Rd		Amount of Each Receipt this Period 50.00
City Frazer	State PA	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 450.00
Name of Employer Teva Pharmaceuticals	Occupation GM, Teva CNS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Michael M Derkacz		Date of Receipt MM / DD / YYYY 05 / 16 / 2014 Transaction ID : A84E885B1B7F14831AC7
Mailing Address 41 Moores Rd		Amount of Each Receipt this Period 50.00
City Frazer	State PA	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00
Name of Employer Teva Pharmaceuticals	Occupation GM, Teva CNS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Michael M Derkacz		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : AFAA811B9B61E404A88A
Mailing Address 41 Moores Rd		Amount of Each Receipt this Period 50.00
City Frazer	State PA	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 550.00
Name of Employer Teva Pharmaceuticals	Occupation GM, Teva CNS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 19 OF 56
	<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Christopher R Doerr		Date of Receipt
Mailing Address 41 Moores Rd		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A022E07EFF3D040F086F
Name of Employer Teva Pharmaceuticals		Amount of Each Receipt this Period
Occupation Dir, Trade Relations		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) B. Christopher R Doerr		Date of Receipt
Mailing Address 41 Moores Rd		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A45A9ACD320CE4364877
Name of Employer Teva Pharmaceuticals		Amount of Each Receipt this Period
Occupation Dir, Trade Relations		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) c. Christopher R Doerr		Date of Receipt
Mailing Address 41 Moores Rd		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : A441966C54A70462180C
Name of Employer Teva Pharmaceuticals		Amount of Each Receipt this Period
Occupation Dir, Trade Relations		<input type="text" value="25.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="275.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL 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 20 OF 56
	<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)
TEVA PAC

A. David Downey
Full Name (Last, First, Middle Initial)

Mailing Address 41 Moores Rd

City Frazer State PA Zip Code 19355

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

Name of Employer Teva Pharmaceuticals Occupation Sr Mgr, Brand Mktg

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **05 / 30 / 2014**

Transaction ID : AA3A2131C82A245A7A34

Amount of Each Receipt this Period **200.00**

B. Larry R Downey
Full Name (Last, First, Middle Initial)

Mailing Address 1005 Holly

City Harrisonville State MO Zip Code 64701

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

Name of Employer Teva Pharmaceuticals Occupation President NA Specialty Meds

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **05 / 30 / 2014**

Transaction ID : A962D667719D24163860

Amount of Each Receipt this Period **5000.00**

Contribution

C. Mark J Eaton
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City North Wales State PA Zip Code 19454-1505

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

Name of Employer Teva Pharmaceuticals Occupation Dir, Area Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **05 / 02 / 2014**

Transaction ID : A12C7AB4FAFD54E6183A

Amount of Each Receipt this Period **25.00**

SUBTOTAL of Receipts This Page (optional)..... **5045.00**

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 21 OF 56
	<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)
TEVA PAC

Full Name (Last, First, Middle Initial)
A. Mark J Eaton

Mailing Address 1090 Horsham Rd.

City North Wales State PA Zip Code 19454-1505

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

Name of Employer Teva Pharmaceuticals Occupation Dir, Area Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2014

Transaction ID : A59F7AC6081E6414BBC5

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Mark J Eaton

Mailing Address 1090 Horsham Rd.

City North Wales State PA Zip Code 19454-1505

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

Name of Employer Teva Pharmaceuticals Occupation Dir, Area Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2014

Transaction ID : AB8895103D1534FC3BF0

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Richard S Egosi

Mailing Address 425 Privet Road

City Horsham State PA Zip Code 19044

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

Name of Employer Teva Pharmaceuticals Occupation Group EVP, CLO & Corp. Sec

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : A78E6A370BB5A4DE59B8

Amount of Each Receipt this Period
75.00

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: (check only one)	PAGE 22 OF 56
<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)
TEVA PAC

A. Richard S Egosi
Full Name (Last, First, Middle Initial)

Mailing Address 425 Privet Road

City Horsham	State PA	Zip Code 19044
-----------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation Group EVP, CLO & Corp. Sec
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : A71F8F2AD494E4B01AF5

Amount of Each Receipt this Period

750.00

B. Richard S Egosi
Full Name (Last, First, Middle Initial)

Mailing Address 425 Privet Road

City Horsham	State PA	Zip Code 19044
-----------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation Group EVP, CLO & Corp. Sec
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : AFA10E50727F74FCF8BC

Amount of Each Receipt this Period

75.00

C. Grant Erdel
Full Name (Last, First, Middle Initial)

Mailing Address 25 Massachusetts Avenue, NW
Suite 440

City Washington	State DC	Zip Code 20001
--------------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation Sr Dir, Government Affairs
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : A1BAB3F7ABF104AA5B78

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional).....▶	170.00
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 23 OF 56
	<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)
TEVA PAC

A. Robert Falb
Full Name (Last, First, Middle Initial)

Mailing Address 25 Massachusetts Avenue, NW
Suite 440

City Washington State DC Zip Code 20001

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

Name of Employer Teva Pharmaceuticals Occupation Dir, Federal Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
211.75

Date of Receipt
05 / 30 / 2014
Transaction ID : A28FF37D92AE34C2E986

Amount of Each Receipt this Period
19.25

B. Richard Scott Fatzinger
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City North Wales State PA Zip Code 19454-1505

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

Name of Employer Teva Pharmaceuticals Occupation Sr Mgr, Regional Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
05 / 30 / 2014
Transaction ID : ABA33607A185245549DC

Amount of Each Receipt this Period
20.00

C. Grace Fernandez
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City North Wales State PA Zip Code 19454-1505

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

Name of Employer Teva Pharmaceuticals Occupation Sr Regional Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
05 / 30 / 2014
Transaction ID : AB54A9F562B0C434DB44

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 59.25

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 24 OF 56
	<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Diane Fitzgerald		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : A3D175EE9C30E452BBCD
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 20.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation Sr Mgr,RegionalAccounts
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. Deborah Alice Griffin		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : A453D4C92B66349B0978
Mailing Address 1090 Horsham Road P.O. Box 1090		Amount of Each Receipt this Period 20.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation SVP & Chief Accounting Officer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Joseph William Grotzinger		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : AE53DC3BC3A7C4FBEA30
Mailing Address 41 Moores Rd		Amount of Each Receipt this Period 20.00
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation Sr Dir, Brand Mktg
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional).....▶	60.00
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 25 OF 56
<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)
TEVA PAC

A. Jessica Grussing
Full Name (Last, First, Middle Initial)
Mailing Address 1090 Horsham Rd.
City North Wales State PA Zip Code 19454-1505
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation Sr Mgr, National Accts
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 30 / 2014
Transaction ID : A709CFAFC14B84F3CBF4
Amount of Each Receipt this Period 20.00

B. John D Hassler
Full Name (Last, First, Middle Initial)
Mailing Address 11100 Nall Ave.
City Overland Park State KS Zip Code 66211
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation VP, Brand Marketing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 30 / 2014
Transaction ID : A4BEA197A50F44A45A39
Amount of Each Receipt this Period 20.00

c. David Helwig
Full Name (Last, First, Middle Initial)
Mailing Address 1090 Horsham Rd.
City North Wales State PA Zip Code 19454-1505
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation Exec Sales Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 30 / 2014
Transaction ID : A893578E98F7744C5BBB
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
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 26 OF 56
	<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)
TEVA PAC

A. Brett J Hitchins
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City North Wales	State PA	Zip Code 19454-1505
---------------------	-------------	------------------------

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

Name of Employer Teva Pharmaceuticals	Occupation Exec Sales Specialist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

Transaction ID : ACF0310E36D464859805

Amount of Each Receipt this Period
25.00

B. Brett J Hitchins
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City North Wales	State PA	Zip Code 19454-1505
---------------------	-------------	------------------------

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

Name of Employer Teva Pharmaceuticals	Occupation Exec Sales Specialist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : A5958BC464DB5412AB57

Amount of Each Receipt this Period
25.00

C. Brett J Hitchins
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City North Wales	State PA	Zip Code 19454-1505
---------------------	-------------	------------------------

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

Name of Employer Teva Pharmaceuticals	Occupation Exec Sales Specialist
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : AF053B7ED273849B1A6D

Amount of Each Receipt this Period
25.00

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: (check only one)	PAGE 27 OF 56
	<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. John C Jacobs		Date of Receipt
Mailing Address 41 Moores Rd		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A08BAB3E5C782402DB16
Name of Employer Teva Pharmaceuticals	Occupation Sr Dir, Therapeutic Area Mktg	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" value="25.00"/>
	<input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) B. John C Jacobs		Date of Receipt
Mailing Address 41 Moores Rd		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A1C7E3BC88F1848CD97E
Name of Employer Teva Pharmaceuticals	Occupation Sr Dir, Therapeutic Area Mktg	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" value="25.00"/>
	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. John C Jacobs		Date of Receipt
Mailing Address 41 Moores Rd		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A136BE8226AEC4DA9947
Name of Employer Teva Pharmaceuticals	Occupation Sr Dir, Therapeutic Area Mktg	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" value="25.00"/>
	<input type="text" value="275.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL 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 28 OF 56
(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)
TEVA PAC

A. Joseph A Jimenez
Full Name (Last, First, Middle Initial)

Mailing Address 3040 Universal Blvd.
Suite 100

City Weston State FL Zip Code 33331

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

Name of Employer Teva Pharmaceuticals Occupation VP PGT Quality

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
726.93

Date of Receipt
05 / 02 / 2014
Transaction ID : **AD65D0989B10646AE8C6**

Amount of Each Receipt this Period
80.77

B. Joseph A Jimenez
Full Name (Last, First, Middle Initial)

Mailing Address 3040 Universal Blvd.
Suite 100

City Weston State FL Zip Code 33331

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

Name of Employer Teva Pharmaceuticals Occupation VP PGT Quality

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
807.70

Date of Receipt
05 / 16 / 2014
Transaction ID : **AE48A6755242A41A8932**

Amount of Each Receipt this Period
80.77

C. Joseph A Jimenez
Full Name (Last, First, Middle Initial)

Mailing Address 3040 Universal Blvd.
Suite 100

City Weston State FL Zip Code 33331

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

Name of Employer Teva Pharmaceuticals Occupation VP PGT Quality

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
888.47

Date of Receipt
05 / 30 / 2014
Transaction ID : **A4C077CAAA8934A6DB19**

Amount of Each Receipt this Period
80.77

SUBTOTAL of Receipts This Page (optional).....▶ 242.31

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 29 OF 56
<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. George Emmett Keefe		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : A19AEED8C4F9E4377BF2
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 200.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation Sr Dir, Account Mgt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. Robert Kincaid		Date of Receipt MM / DD / YYYY 05 / 02 / 2014 Transaction ID : A135E7C4355D4BE9935
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 100.00
City North Wales	State PA	Zip Code 19454
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation Dir, State Govt Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) C. Robert Kincaid		Date of Receipt MM / DD / YYYY 05 / 16 / 2014 Transaction ID : A6080F137FFF943989A1
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 100.00
City North Wales	State PA	Zip Code 19454
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation Dir, State Govt Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	220.00
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 30 OF 56
	<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)
TEVA PAC

A. Robert Kincaid
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City	State	Zip Code
North Wales	PA	19454

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

Name of Employer	Occupation
Teva Pharmaceuticals	Dir, State Govt Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2014

Transaction ID : A5BE5D581E6C24FF79BF

Amount of Each Receipt this Period
100.00

B. Daniel W Kinsey
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City	State	Zip Code
North Wales	PA	19454-1505

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

Name of Employer	Occupation
Teva Pharmaceuticals	Sr Exec Sales Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : A5B0567AEBBC7A4D51A29

Amount of Each Receipt this Period
25.00

C. Daniel W Kinsey
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City	State	Zip Code
North Wales	PA	19454-1505

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

Name of Employer	Occupation
Teva Pharmaceuticals	Sr Exec Sales Specialist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 16 / 2014

Transaction ID : A3DDC665B63694640966

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 31 OF 56
<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Daniel W Kinsey		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : ABA8122D7ED8A4A05A68
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 95.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 275.00	
Name of Employer Teva Pharmaceuticals	Occupation Sr Exec Sales Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. Daniel P Lawlor		Date of Receipt MM / DD / YYYY 05 / 02 / 2014 Transaction ID : ADE1AE1008E6D4ACF888
Mailing Address 41 Moores Rd		Amount of Each Receipt this Period 35.00
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 315.00	
Name of Employer Teva Pharmaceuticals	Occupation VP, Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) C. Daniel P Lawlor		Date of Receipt MM / DD / YYYY 05 / 16 / 2014 Transaction ID : A5E05C3F2E193416A9AD
Mailing Address 41 Moores Rd		Amount of Each Receipt this Period 350.00
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 350.00	
Name of Employer Teva Pharmaceuticals	Occupation VP, Human Resources	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	95.00
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 32 OF 56
<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)
TEVA PAC

A. Daniel P Lawlor
Full Name (Last, First, Middle Initial)

Mailing Address 41 Moores Rd

City Frazer	State PA	Zip Code 19355
----------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation VP, Human Resources
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	30	/	2014

Transaction ID : ABEFBF7D9FAD545ABB3I

Amount of Each Receipt this Period

800	.	00
35.00		

B. Kevin J Lindsay
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City North Wales	State PA	Zip Code 19454-1505
---------------------	-------------	------------------------

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

Name of Employer Teva Pharmaceuticals	Occupation Sr Dir, Account Mgt
--	-----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	30	/	2014

Transaction ID : A568BA4FB4A0A469381A

Amount of Each Receipt this Period

800	.	00
20.00		

C. Claire E Lozano
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City North Wales	State PA	Zip Code 19454-1505
---------------------	-------------	------------------------

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

Name of Employer Teva Pharmaceuticals	Occupation Field Reimbursement Mgr - Onc
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	02	/	2014

Transaction ID : A901F07AB954642BD942

Amount of Each Receipt this Period

800	.	00
25.00		

SUBTOTAL of Receipts This Page (optional).....▶	80.00
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 33 OF 56
<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Claire E Lozano		Date of Receipt MM / DD / YYYY 05 / 16 / 2014 Transaction ID : AD22FF3EE721C4D89B27
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 250.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation Field Reimbursement Mgr - Onc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Claire E Lozano		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : AF5C7C698CB784DB783E
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 25.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation Field Reimbursement Mgr - Onc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) C. Alicia Manocchio		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : A7E6237744D524EA3B2F
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 19.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation Sr Exec Sales Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 209.00	

SUBTOTAL of Receipts This Page (optional).....▶	69.00
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 34 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
TEVA PAC

Full Name (Last, First, Middle Initial) A. David M Marshall		Date of Receipt MM / DD / YYYY 05 / 30 / 2014
Mailing Address 1090 Horsham Road P.O. Box 1090		Transaction ID : AE97763E5AC3443DB81B
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Teva Pharmaceuticals	Occupation VP Strat Commercial Initiatives	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. Lorraine E McClain		Date of Receipt MM / DD / YYYY 05 / 30 / 2014
Mailing Address 905 Airport Rd.		Transaction ID : A82B5E72DD8E54078937
City West Chester	State PA	Zip Code 19380
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer Teva Pharmaceuticals	Occupation Sr Dir, Quality Compliance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) C. Michael McHugh		Date of Receipt MM / DD / YYYY 05 / 02 / 2014
Mailing Address 11100 Nall Ave.		Transaction ID : A752EA505323342968FA
City Overland Park	State KS	Zip Code 66211
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer Teva Pharmaceuticals	Occupation GM, Teva Select Brand & Svcs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

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: (check only one)	PAGE 35 OF 56
	<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)
TEVA PAC

A. Michael McHugh
Full Name (Last, First, Middle Initial)
Mailing Address 11100 Nall Ave.
City Overland Park State KS Zip Code 66211
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation GM, Teva Select Brand & Svcs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 16 / 2014
Transaction ID : AFDDAD2E8B57943FB82A
Amount of Each Receipt this Period 350.00

B. Michael McHugh
Full Name (Last, First, Middle Initial)
Mailing Address 11100 Nall Ave.
City Overland Park State KS Zip Code 66211
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation GM, Teva Select Brand & Svcs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 385.00

Date of Receipt 05 / 30 / 2014
Transaction ID : AD2BA550AB29F4AF5B48
Amount of Each Receipt this Period 35.00

C. Marlynnia M McMullen
Full Name (Last, First, Middle Initial)
Mailing Address 1090 Horsham Rd.
City North Wales State PA Zip Code 19454-1505
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation Exec Sales Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 30 / 2014
Transaction ID : A674E6D29935B4A3BADD
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 90.00
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 36 OF 56
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. James P Meyer		Date of Receipt MM / DD / YYYY 05 / 02 / 2014 Transaction ID : A07C9D6F237204517972
Mailing Address 41 Moores Rd		Amount of Each Receipt this Period 25.00
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	
Occupation Sr Dir, New Prod Mktg		Aggregate Year-to-Date ▼ 225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. James P Meyer		Date of Receipt MM / DD / YYYY 05 / 16 / 2014 Transaction ID : AC4255FB404C84AFF8FF
Mailing Address 41 Moores Rd		Amount of Each Receipt this Period 25.00
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	
Occupation Sr Dir, New Prod Mktg		Aggregate Year-to-Date ▼ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. James P Meyer		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : A7AAB95216C4448B2AC7
Mailing Address 41 Moores Rd		Amount of Each Receipt this Period 25.00
City Frazer	State PA	Zip Code 19355
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	
Occupation Sr Dir, New Prod Mktg		Aggregate Year-to-Date ▼ 275.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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: (check only one)	PAGE 37 OF 56
	<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Ryan Miller		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : A57EAF0EF1594FCFA48
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 20.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation Mgr, Regional Sales
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

Full Name (Last, First, Middle Initial) B. Monroe Gerald Moore Jr		Date of Receipt MM / DD / YYYY 05 / 02 / 2014 Transaction ID : AED86FA7FA78C40AA886
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 25.00
City North Wales	State PA	Zip Code 19454
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation Dir, State Govt Affairs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Monroe Gerald Moore Jr		Date of Receipt MM / DD / YYYY 05 / 16 / 2014 Transaction ID : A0E25DD1B1D0A49998F0
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 25.00
City North Wales	State PA	Zip Code 19454
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation Dir, State Govt Affairs
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 38 OF 56
	<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)
TEVA PAC

A. Monroe Gerald Moore Jr
Full Name (Last, First, Middle Initial)
Mailing Address 1090 Horsham Rd.
City North Wales State PA Zip Code 19454
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation Dir, State Govt Affairs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 30 / 2014
Transaction ID : A3614B809BFE64E0F836
Amount of Each Receipt this Period 25.00

B. Jeffery Clinton Moser
Full Name (Last, First, Middle Initial)
Mailing Address 1090 Horsham Rd.
City North Wales State PA Zip Code 19454-1505
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation Mgr, Regional Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 30 / 2014
Transaction ID : ADF69E944A55646918FD
Amount of Each Receipt this Period 20.00

C. James Nicholas
Full Name (Last, First, Middle Initial)
Mailing Address 11100 Nall Ave.
City Overland Park State KS Zip Code 66211
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation VP Spec Life Cycle Initiatives
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 30 / 2014
Transaction ID : A59A11235DA9D4F49BF7
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 65.00
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 39 OF 56
<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Linda Evans O'Connor		Date of Receipt
Mailing Address 400 Chestnut Ridge Road		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
Woodcliff Lake	NJ	07677
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A82E4B3573AC14A7E9CF
Name of Employer	Occupation	Amount of Each Receipt this Period
Teva Pharmaceuticals	VP. Supplier Quality Mgmt	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="270.00"/>	

Full Name (Last, First, Middle Initial) B. Linda Evans O'Connor		Date of Receipt
Mailing Address 400 Chestnut Ridge Road		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Woodcliff Lake	NJ	07677
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AA7F68129CFC64BE599D
Name of Employer	Occupation	Amount of Each Receipt this Period
Teva Pharmaceuticals	VP. Supplier Quality Mgmt	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) C. Linda Evans O'Connor		Date of Receipt
Mailing Address 400 Chestnut Ridge Road		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Woodcliff Lake	NJ	07677
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AC81559A099554C59A57
Name of Employer	Occupation	Amount of Each Receipt this Period
Teva Pharmaceuticals	VP. Supplier Quality Mgmt	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="330.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="90.00"/>
TOTAL 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 40 OF 56
	<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)
TEVA PAC

A. Brendan P O'Grady
Full Name (Last, First, Middle Initial)

Mailing Address 11100 Nall Ave.

City Overland Park	State KS	Zip Code 66211
-----------------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation VP, US Market Access
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

Transaction ID : A66FE4C76B6C74F4BBF6

Amount of Each Receipt this Period

40.00

B. Brendan P O'Grady
Full Name (Last, First, Middle Initial)

Mailing Address 11100 Nall Ave.

City Overland Park	State KS	Zip Code 66211
-----------------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation VP, US Market Access
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : A2ECC61B0D6894129970

Amount of Each Receipt this Period

40.00

C. Brendan P O'Grady
Full Name (Last, First, Middle Initial)

Mailing Address 11100 Nall Ave.

City Overland Park	State KS	Zip Code 66211
-----------------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation VP, US Market Access
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : A4FF25C8280164A85878

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 41 OF 56
<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Robert Pearce		Date of Receipt MM / DD / YYYY 05 / 02 / 2014 Transaction ID : AB9F35EC53E994487890
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 25.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation Sr Mgr, National Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Robert Pearce		Date of Receipt MM / DD / YYYY 05 / 16 / 2014 Transaction ID : A85A9D121419D4EFBA0B
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 25.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation Sr Mgr, National Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Robert Pearce		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : A517D64D3C21E4339B2F
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 25.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation Sr Mgr, National Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate 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: (check only one)	PAGE 42 OF 56
<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)
TEVA PAC

A. Douglas Percell
Full Name (Last, First, Middle Initial)
Mailing Address 23 Hughes

City Irvine	State CA	Zip Code 92618
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FEC ID number of contributing federal political committee. **C**

Name of Employer Teva Pharmaceuticals	Occupation Director of Supply Chain Mgmt.
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

Transaction ID : A44EAA3822FC14A21AB5

Amount of Each Receipt this Period

40.00

B. Douglas Percell
Full Name (Last, First, Middle Initial)
Mailing Address 23 Hughes

City Irvine	State CA	Zip Code 92618
----------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation Director of Supply Chain Mgmt.
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : A1BA487275B054844BC2

Amount of Each Receipt this Period

40.00

C. Douglas Percell
Full Name (Last, First, Middle Initial)
Mailing Address 23 Hughes

City Irvine	State CA	Zip Code 92618
----------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation Director of Supply Chain Mgmt.
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : ACAF5AE94115342F5BDE

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional).....▶	120.00
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 43 OF 56
	<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Charles Jason Perfetti		Date of Receipt
Mailing Address 1090 Horsham Rd.		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
North Wales	PA	19454-1505
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AEE0EA4BE058D4E36AC2
Name of Employer	Occupation	Amount of Each Receipt this Period
Teva Pharmaceuticals	Prof Oncology Account Spec	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) B. Charles Jason Perfetti		Date of Receipt
Mailing Address 1090 Horsham Rd.		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
North Wales	PA	19454-1505
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A034DACAB97994268BDA
Name of Employer	Occupation	Amount of Each Receipt this Period
Teva Pharmaceuticals	Prof Oncology Account Spec	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. Charles Jason Perfetti		Date of Receipt
Mailing Address 1090 Horsham Rd.		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
North Wales	PA	19454-1505
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A3C2A4F5A506345598B6
Name of Employer	Occupation	Amount of Each Receipt this Period
Teva Pharmaceuticals	Prof Oncology Account Spec	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="275.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL 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 44 OF 56
<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Thomas P Powers		Date of Receipt MM / DD / YYYY 05 / 02 / 2014 Transaction ID : A0327F96213C0426AA16
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 30.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation Exec Sales Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) B. Thomas P Powers		Date of Receipt MM / DD / YYYY 05 / 16 / 2014 Transaction ID : AC59CD0D9E9D04CD0983
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 30.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation Exec Sales Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Thomas P Powers		Date of Receipt MM / DD / YYYY 05 / 30 / 2014 Transaction ID : A506C5469F5C745F1824
Mailing Address 1090 Horsham Rd.		Amount of Each Receipt this Period 30.00
City North Wales	State PA	Zip Code 19454-1505
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation Exec Sales Specialist
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 45 OF 56
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEVA PAC

A. William J Rittweger
 Full Name (Last, First, Middle Initial)
 Mailing Address 1090 Horsham Rd.
 City North Wales State PA Zip Code 19454-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Teva Pharmaceuticals Occupation Sr Mgr Regional Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014
Transaction ID : A1357E54935FE46219AC
 Amount of Each Receipt this Period
 25.00

B. William J Rittweger
 Full Name (Last, First, Middle Initial)
 Mailing Address 1090 Horsham Rd.
 City North Wales State PA Zip Code 19454-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Teva Pharmaceuticals Occupation Sr Mgr Regional Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2014
Transaction ID : A8B705079C9814261A81
 Amount of Each Receipt this Period
 25.00

C. William J Rittweger
 Full Name (Last, First, Middle Initial)
 Mailing Address 1090 Horsham Rd.
 City North Wales State PA Zip Code 19454-1505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Teva Pharmaceuticals Occupation Sr Mgr Regional Sales
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2014
Transaction ID : AB5FFF09FAF0A4DB083F
 Amount of Each Receipt this Period
 25.00

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: (check only one)	PAGE 46 OF 56
<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)
TEVA PAC

A. James Rodenberg
Full Name (Last, First, Middle Initial)

Mailing Address 11100 Nall Ave.

City Overland Park	State KS	Zip Code 66211
-----------------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation General Counsel, Brand Pharma
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

Transaction ID : A5EECCD2C67504CE58F6

Amount of Each Receipt this Period

30.00

B. James Rodenberg
Full Name (Last, First, Middle Initial)

Mailing Address 11100 Nall Ave.

City Overland Park	State KS	Zip Code 66211
-----------------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation General Counsel, Brand Pharma
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : A9974F506FB8F41638F9

Amount of Each Receipt this Period

30.00

C. James Rodenberg
Full Name (Last, First, Middle Initial)

Mailing Address 11100 Nall Ave.

City Overland Park	State KS	Zip Code 66211
-----------------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation General Counsel, Brand Pharma
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : A2C47A231D9A3433EA66

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 47 OF 56
	<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	

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)
TEVA PAC

A. Mark W Salyer
Full Name (Last, First, Middle Initial)

Mailing Address 41 Moores Rd

City Frazer State PA Zip Code 19355

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

Name of Employer Teva Pharmaceuticals Occupation GM, Teva Respiratory

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2014

Transaction ID : A84483CAF203347EC9D8

Amount of Each Receipt this Period
50.00

B. Mark W Salyer
Full Name (Last, First, Middle Initial)

Mailing Address 41 Moores Rd

City Frazer State PA Zip Code 19355

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

Name of Employer Teva Pharmaceuticals Occupation GM, Teva Respiratory

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2014

Transaction ID : A1970A0874CDD4DF98D0

Amount of Each Receipt this Period
50.00

C. Mark W Salyer
Full Name (Last, First, Middle Initial)

Mailing Address 41 Moores Rd

City Frazer State PA Zip Code 19355

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

Name of Employer Teva Pharmaceuticals Occupation GM, Teva Respiratory

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 30 / 2014

Transaction ID : A024D7936A5474545881

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **150.00**

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 48 OF 56
	<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)
TEVA PAC

A. Gary Smith
Full Name (Last, First, Middle Initial)

Mailing Address 1090 Horsham Rd.

City North Wales	State PA	Zip Code 19454-1505
---------------------	-------------	------------------------

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

Name of Employer Teva Pharmaceuticals	Occupation Dir, Area Sales
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	30	/	2014

Transaction ID : A939D4C089FDA4F4889E

Amount of Each Receipt this Period
20.00

B. Dalton Tomlinson
Full Name (Last, First, Middle Initial)

Mailing Address 41 Moores Rd

City Frazer	State PA	Zip Code 19355
----------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation VP Gbl Pain & NeuroPsych Lead
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	02	/	2014

Transaction ID : A83E8B0DF93864496B5F

Amount of Each Receipt this Period
25.00

C. Dalton Tomlinson
Full Name (Last, First, Middle Initial)

Mailing Address 41 Moores Rd

City Frazer	State PA	Zip Code 19355
----------------	-------------	-------------------

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

Name of Employer Teva Pharmaceuticals	Occupation VP Gbl Pain & NeuroPsych Lead
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	16	/	2014

Transaction ID : A517534C72B47487EB15

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	70.00
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 49 OF 56
<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)
TEVA PAC

A. Dalton Tomlinson
Full Name (Last, First, Middle Initial)
Mailing Address 41 Moores Rd
City Frazer State PA Zip Code 19355
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation VP Gbl Pain & NeuroPsych Lead
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00
Date of Receipt 05 / 30 / 2014
Transaction ID : **AEE577747C5904AC89A0**
Amount of Each Receipt this Period 25.00

B. John Vaughn
Full Name (Last, First, Middle Initial)
Mailing Address 1090 Horsham Rd.
City North Wales State PA Zip Code 19454-1505
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation Sr Exec Sales Specialist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 05 / 30 / 2014
Transaction ID : **A07ECF8F44FD34A93BC1**
Amount of Each Receipt this Period 20.00

C. Gregory K Westbrook
Full Name (Last, First, Middle Initial)
Mailing Address 11100 Nall Ave.
City Overland Park State KS Zip Code 66211
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation VP Global HR Ops and Svcs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 05 / 02 / 2014
Transaction ID : **A1CB2F8326B2F4F84997**
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 70.00
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 50 OF 56
(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)
TEVA PAC

A. Gregory K Westbrook
Full Name (Last, First, Middle Initial)
Mailing Address 11100 Nall Ave.
City Overland Park State KS Zip Code 66211
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation VP Global HR Ops and Svcs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2014
Transaction ID : A2B87D3E4B1254EBEA1F
Amount of Each Receipt this Period 250.00

B. Gregory K Westbrook
Full Name (Last, First, Middle Initial)
Mailing Address 11100 Nall Ave.
City Overland Park State KS Zip Code 66211
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation VP Global HR Ops and Svcs
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt 05 / 30 / 2014
Transaction ID : A5FB5422AA6F84E079CF
Amount of Each Receipt this Period 25.00

C. George M White
Full Name (Last, First, Middle Initial)
Mailing Address 11100 Nall Ave.
City Overland Park State KS Zip Code 66211
FEC ID number of contributing federal political committee. **C**
Name of Employer Teva Pharmaceuticals Occupation Sr App Developer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 02 / 2014
Transaction ID : A15D0D6B85EC8462AB2D
Amount of Each Receipt this Period 25.00

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: (check only one)	PAGE 51 OF 56
	<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. George M White		Date of Receipt
Mailing Address 11100 Nall Ave.		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
Overland Park	KS	66211
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Teva Pharmaceuticals	Sr App Developer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	
		Transaction ID : A7F42AEB832CD4F2E9F1
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) B. George M White		Date of Receipt
Mailing Address 11100 Nall Ave.		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Overland Park	KS	66211
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Teva Pharmaceuticals	Sr App Developer	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="275.00"/>	
		Transaction ID : AB383BCAA152A441BB55
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

Full Name (Last, First, Middle Initial) C. Courtney Winterbottom		Date of Receipt
Mailing Address 1090 Horsham Rd.		<input type="text" value="05"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code
North Wales	PA	19454-1505
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Teva Pharmaceuticals	Sr Mgr, Regional Sales	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	
		Transaction ID : A69D40437EF814134BB3
		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
TOTAL 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 52 OF 56
	<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)
TEVA PAC

Full Name (Last, First, Middle Initial) A. Courtney Winterbottom		Date of Receipt
Mailing Address 1090 Horsham Rd.		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
North Wales	PA	19454-1505
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AB40E1A245FDE49BE9CE
Name of Employer	Occupation	Amount of Each Receipt this Period
Teva Pharmaceuticals	Sr Mgr, Regional Sales	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) B. Courtney Winterbottom		Date of Receipt
Mailing Address 1090 Horsham Rd.		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
North Wales	PA	19454-1505
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : ADE562543811D402DBC2
Name of Employer	Occupation	Amount of Each Receipt this Period
Teva Pharmaceuticals	Sr Mgr, Regional Sales	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="275.00"/>	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="50.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="10356.06"/>

**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)

<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)
TEVA PAC

Full Name (Last, First, Middle Initial)

A. BOB GOODLATTE FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Mailing Address P.O. BOX 292

Transaction ID : BD500B9A7336349EF8CA

City State Zip Code
Roanoke VA 24002-0292

Amount of Each Disbursement this Period

4000.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name

Rep. Bob W. Goodlatte

Office Sought: House
 Senate
 President
State: VA District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. BOB GOODLATTE FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2014

Mailing Address P.O. BOX 292

Transaction ID : B2252B29D93884AB78BA

City State Zip Code
Roanoke VA 24002-0292

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name

Rep. Bob W. Goodlatte

Office Sought: House
 Senate
 President
State: VA District: 06

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. CANTOR FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		05		2014

Mailing Address P. O. Box 17813

Transaction ID : B7D99B1781BAC4EFBA64

City State Zip Code
Richmond VA 23226-7813

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Political Contribution

Category/ Type

Candidate Name

Rep. Eric I. Cantor

Office Sought: House
 Senate
 President
State: VA District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

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

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

10000.00

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**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)

<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)
TEVA PAC

Full Name (Last, First, Middle Initial)

A. CITIZENS FOR PROSPERITY IN AMERICA TODAY PAC

Mailing Address 228 S WASHINGTON ST STE 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District: Leadership PAC2014

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2014

Transaction ID : B85431C447411483381D

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. GUTHRIE FOR CONGRESS

Mailing Address PO BOX 9639

City Bowling Green State KY Zip Code 42102-9639

Purpose of Disbursement
Contribution

Candidate Name

Rep. Brett Guthrie

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KY District: 02

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2014

Transaction ID : BD165E7806E434B50B13

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. NATIONAL REPUBLICAN SENATORIAL COMMITTEE

Mailing Address 425 SECOND STREET NE

City Washington State DC Zip Code 20002-4914

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District: Other2014

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2014

Transaction ID : B0888BF11096048DDA43

Amount of Each Disbursement this Period

5000.00

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

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

8500.00

**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)

<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)
TEVA PAC

Full Name (Last, First, Middle Initial)

A. PAT ROBERTS FOR US SENATE INC

Mailing Address PO BOX 433

City State Zip Code
Great Bend KS 67530-0433

Purpose of Disbursement
Political Contribution

Candidate Name

Sen. Pat Roberts

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2014

Transaction ID : B19E6FF2556F74A33A20

Amount of Each Disbursement this Period

5,000.00

Full Name (Last, First, Middle Initial)

B. PAT ROBERTS FOR US SENATE INC

Mailing Address PO BOX 433

City State Zip Code
Great Bend KS 67530-0433

Purpose of Disbursement
Political Contribution

Candidate Name

Sen. Pat Roberts

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: KS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2014

Transaction ID : B6E808875780B41FDBF6

Amount of Each Disbursement this Period

5,000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Disbursement this Period

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

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

10000.00

28500.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEVA PAC

Full Name (Last, First, Middle Initial)

A. Friends of Joe Scarnati

Mailing Address 410 Main Street

City Brockway State PA Zip Code 15824-1325

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Other2014

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : B03EFCB94056643819FD

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

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

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

1000.00

1000.00