

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Cephalon, Inc. Employees' Political Action Committee

ADDRESS (number and street) 41 Moores Road  
 Check if different than previously reported. (ACC)  
Frazer PA 19355

2. **FEC IDENTIFICATION NUMBER** C00378794  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on 11 04 2008 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 10 01 2008 through 10 15 2008

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 John M Farah, Jr.

Signature of Treasurer Electronically Filed by John M Farah, Jr. Date 10 20 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Cephalon, Inc. Employees' Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		76206.95
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	86718.95									
(c) Total Receipts (from Line 19) .....	2198.00	42210.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	88916.95	118416.95								
7. Total Disbursements (from Line 31) .....	2000.00	31500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	86916.95	86916.95								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Cephalon, Inc. Employees' Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

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	1688.00	30675.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	510.00	11535.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	2198.00	42210.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	2198.00	42210.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	2198.00	42210.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2198.00	42210.00

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	26000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	5500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2000.00	31500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2000.00	31500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	2198.00	42210.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2198.00	42210.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 15

(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)  
Cephalon, Inc. Employees' Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) ROBERT M. YOUNGBLOOD		Date of Receipt
	Mailing Address 5120 ROLLING FAIRWAY DRIVE		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City VALRICO	State FL	Zip Code 33596-8220
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR1150529315228
	Name of Employer Cephalon, Inc.		Occupation National Account Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="285.00"/>	Amount of Each Receipt this Period <input type="text" value="15.00"/>
			P/R Deduction (\$15.00 Semi-Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) RUSSELL A. BRIERLEY		Date of Receipt
	Mailing Address 1297 W. KIRKLAND AVE		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City WEST CHESTER	State PA	Zip Code 19380-1204
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR1150533015228
	Name of Employer Cephalon, Inc.		Occupation Senior Director
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="475.00"/>	Amount of Each Receipt this Period <input type="text" value="25.00"/>
			P/R Deduction (\$25.00 Semi-Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) JOSEPH S. TURI		Date of Receipt
	Mailing Address 1713 YARDLEY DRIVE		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City WEST CHESTER	State PA	Zip Code 19380-5785
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR1150534415228
	Name of Employer Cephalon, Inc.		Occupation Vice President
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="950.00"/>	Amount of Each Receipt this Period <input type="text" value="50.00"/>
			P/R Deduction (\$50.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="90.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 15  
(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)  
Cephalon, Inc. Employees' Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
DANIEL W KINSEY

Mailing Address 904 WOODOAK LANE

City CHARLESTON State WV Zip Code 25314-1874

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

Name of Employer Cephalon, Inc. Occupation CNS Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt 10 / 15 / 2008

**Transaction ID:** PR1150534615228

Amount of Each Receipt this Period 25.00

P/R Deduction (\$25.00 Semi-Monthly)

**B.** Full Name (Last, First, Middle Initial)  
NADINE F RAUCH

Mailing Address 12966 FAIRWAY DR

City LEMONT State IL Zip Code 60439-4566

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

Name of Employer Cephalon, Inc. Occupation Addiction Medicine Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt 10 / 15 / 2008

**Transaction ID:** PR1150535515228

Amount of Each Receipt this Period 15.00

P/R Deduction (\$15.00 Semi-Monthly)

**C.** Full Name (Last, First, Middle Initial)  
ROBERT J. URBAN

Mailing Address 9 TUNBRIDGE LANE

City MALVERN State PA Zip Code 19355-1042

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

Name of Employer Cephalon, Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 10 / 15 / 2008

**Transaction ID:** PR1150536115228

Amount of Each Receipt this Period 100.00

P/R Deduction (\$100.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 140.00

**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 8 / 15  
(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)  
Cephalon, Inc. Employees' Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) KENNETH J. FIORELLI		Date of Receipt MM / DD / YYYY 10 / 15 / 2008
Mailing Address 1230 CORNERSTONE BLD APT 354		Transaction ID: PR1150537715228
City DOWNTOWN	State Zip Code PA 19335-5355	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Cephalon, Inc.	Occupation Vice President	P/R Deduction (\$25.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

**B.**

Full Name (Last, First, Middle Initial) SHERYL L WILLIAMS		Date of Receipt MM / DD / YYYY 10 / 15 / 2008
Mailing Address 118 UPLAND TERRACE		Transaction ID: PR1150537815228
City BALA CYNWYD	State Zip Code PA 19004-3127	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Cephalon, Inc.	Occupation Vice President Public Affairs	P/R Deduction (\$100.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1900.00	

**C.**

Full Name (Last, First, Middle Initial) JEFFERSON M MYERS		Date of Receipt MM / DD / YYYY 10 / 15 / 2008
Mailing Address 7704 GEORGETOWN PIKE		Transaction ID: PR1150543615228
City MC LEAN	State Zip Code VA 22102-1431	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Cephalon, Inc.	Occupation Vice President Government Affairs	P/R Deduction (\$100.00 Semi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1900.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 15  
(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)  
Cephalon, Inc. Employees' Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
ROBERT P. ROCHE

Mailing Address 199 S. SPRING MILL

City State Zip Code  
VILLANOVA PA 19085

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

Name of Employer Occupation  
Cephalon, Inc. EVPWWPO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

**Transaction ID:** PR1157783315228

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$100.00 Se-mi-Monthly)

**B.** Full Name (Last, First, Middle Initial)  
JEFFRY L VAUGHT

Mailing Address 206 KATHLEEN WAY

City State Zip Code  
GLENMOORE PA 19343-2662

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

Name of Employer Occupation  
Cephalon, Inc. Executive Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

**Transaction ID:** PR1157783415228

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$100.00 Se-mi-Monthly)

**C.** Full Name (Last, First, Middle Initial)  
J. KEVIN BUCHI

Mailing Address 202 BRIDLE PATH DR

City State Zip Code  
NEWARK DE 19711-8308

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

Name of Employer Occupation  
Cephalon, Inc. Exec. Vice President & CFO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 5 / 2 0 0 8

**Transaction ID:** PR1157783615228

Amount of Each Receipt this Period  
100.00

P/R Deduction (\$100.00 Se-mi-Monthly)

**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 10 / 15
	<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)  
Cephalon, Inc. Employees' Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) CARL A. SAVINI	Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2008
	Mailing Address 1140 ST. FINEGAN DRIVE	<b>Transaction ID:</b> PR1157783715228
	City WEST CHESTER State PA Zip Code 19382-2318	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$100.00 Se-mi-Monthly)
	Name of Employer Cephalon, Inc. Occupation Executive Vice President & CAO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) PETER E GREBOW	Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2008
	Mailing Address 704 BUCKLEY RD	<b>Transaction ID:</b> PR1231560115228
	City PENLLYN State PA Zip Code 19422-1144	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$100.00 Se-mi-Monthly)
	Name of Employer Cephalon, Inc. Occupation Executive Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) FRITZ I BITTENBENDER	Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2008
	Mailing Address 630 RICHARDS ROAD	<b>Transaction ID:</b> PR1259688915228
	City WAYNE State PA Zip Code 19087-1008	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$100.00 Se-mi-Monthly)
	Name of Employer Cephalon, Inc. Occupation Senior Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 15
	<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)  
Cephalon, Inc. Employees' Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) STEVEN H GERSON		Date of Receipt
	Mailing Address 2508 POND VIEW DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 15 / 2008
	City	State	Zip Code
	WEST CHESTER	PA	19382-6301
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR1309510915228
Name of Employer Cephalon, Inc.		Occupation Senior Analytical Chemist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 950.00	<input type="text"/> 50.00
			P/R Deduction (\$50.00 Semi-Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) STEPHEN G CANNATA		Date of Receipt
	Mailing Address 125 CROSSPOINTE DR.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 15 / 2008
	City	State	Zip Code
	WEST CHESTER	PA	19380-4165
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR1323381415228
Name of Employer Cephalon, Inc.		Occupation Senior Director	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 ▼ 475.00	<input type="text"/> 25.00
			P/R Deduction (\$25.00 Semi-Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) DEBORAH W BEARER		Date of Receipt
	Mailing Address 1610 WHITE OAK CT		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 15 / 2008
	City	State	Zip Code
	PITTSBURGH	PA	15237-6700
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR1333454115228
Name of Employer Cephalon, Inc.		Occupation Director Health Care Systems	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 ▼ 475.00	<input type="text"/> 25.00
			P/R Deduction (\$25.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 100.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 15
	<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)  
Cephalon, Inc. Employees' Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) JENNIFER M CONNELLY		Date of Receipt
	Mailing Address 308 DAWNWOOD DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 15 / 2008
	City	State	Zip Code
	EDGEWATER	MD	21037-3442
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR1345005315228
Name of Employer Cephalon, Inc.		Occupation Director Policy Development	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 950.00	<input type="text"/> 50.00
			P/R Deduction (\$50.00 Semi-Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) LESLEY RUSSELL COOPER		Date of Receipt
	Mailing Address 200 PEMBROOKE CIRCLE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 15 / 2008
	City	State	Zip Code
	PHOENIXVILLE	PA	19460-5724
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR1411031015228
Name of Employer Cephalon, Inc.		Occupation Executive Vice President	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 ▼ 600.00	<input type="text"/> 100.00
			P/R Deduction (\$100.00 Semi-Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) MARY ROBIN DEROGATIS		Date of Receipt
	Mailing Address 108 PENNINGTON RD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 15 / 2008
	City	State	Zip Code
	PAOLI	PA	19301-1118
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> PR1414688315228
Name of Employer Cephalon, Inc.		Occupation Vice President Human Resources	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 950.00	<input type="text"/> 50.00
			P/R Deduction (\$50.00 Semi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 200.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 15  
(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)  
Cephalon, Inc. Employees' Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
JEFFREY M DAYNO

Mailing Address 1501 FOXBURY ROAD

City State Zip Code  
MAPLE GLEN PA 19002-3236

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

Name of Employer Occupation  
Cephalon, Inc. Vice President Medical Services

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
MM / DD / YYYY  
10 / 15 / 2008

**Transaction ID:** PR1414688415228

Amount of Each Receipt this Period  
50.00

P/R Deduction (\$50.00 Semi-Monthly)

**B.** Full Name (Last, First, Middle Initial)  
ELIZABETH A BARRETT

Mailing Address 3 WOODSIDE LANE

City State Zip Code  
NEW HOPE PA 18938-9281

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

Name of Employer Occupation  
Cephalon, Inc. Vice President Oncology

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
MM / DD / YYYY  
10 / 15 / 2008

**Transaction ID:** PR1428434015228

Amount of Each Receipt this Period  
50.00

P/R Deduction (\$50.00 Semi-Monthly)

**C.** Full Name (Last, First, Middle Initial)  
JAY D. MCKINLEY

Mailing Address 67 JENNIFER DRIVE

City State Zip Code  
CHESTER SPRINGS PA 19425-8728

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

Name of Employer Occupation  
Cephalon, Inc. Senior Director Contract Operations

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
MM / DD / YYYY  
10 / 15 / 2008

**Transaction ID:** PR1558451515228

Amount of Each Receipt this Period  
25.00

P/R Deduction (\$25.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **125.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 15  
(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)  
Cephalon, Inc. Employees' Political Action Committee

A.

Full Name (Last, First, Middle Initial)  
VALLI F BALDASSANO

Mailing Address 9 QUAIL LANE

City	State	Zip Code
OTTSMVILLE	PA	18942-1771

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

Name of Employer Cephalon, Inc.	Occupation Executive Vice President
------------------------------------	--

Receipt For:

Primary     General

Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	8

Transaction ID: PR1618212915228

Amount of Each Receipt this Period

208.00

P/R Deduction (\$208.00 Se-  
mi-Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	208.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1688.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 15

<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)  
Cephalon, Inc. Employees' Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
McConnell Senate Committee '08

Mailing Address PO Box 1496

City State Zip Code  
Louisville KY 40201

Purpose of Disbursement

Candidate Name  
Sen. Mitch McConnell

Office Sought:  House  
 Senate  
 President  
State: KY District:

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: 26547953  
Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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