

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. 12FE4M5 TEVA PAC

ADDRESS (number and street) 25 Massachusetts Avenue, NW Suite 440 Washington DC 20001 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00434811 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, May 20, Aug 20, Nov 20, Mar 20, Jun 20, Sep 20, Dec 20, Apr 20, Jul 20, Oct 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 04 / 01 / 2015 through 04 / 30 / 2015

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 05 / 19 / 2015

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 table with 7 columns and 1 row. FEC FORM 3X Rev. 12/2004

**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="2015"/>	<input type="text" value="31836.69"/>	<input type="text" value="31836.69"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="27392.59"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="9155.34"/>	<input type="text" value="38409.36"/>
(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="36547.93"/>	<input type="text" value="70246.05"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4500.00"/>	<input type="text" value="38198.12"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="32047.93"/>	<input type="text" value="32047.93"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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).....	2008.54	5590.12
(ii) Unitemized .....	7146.80	32819.24
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	9155.34	38409.36
(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) .....	9155.34	38409.36
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))..... ▶	9155.34	38409.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	9155.34	38409.36

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	1198.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	1198.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3500.00	36000.00
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	1000.00
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)) ..	4500.00	38198.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4500.00	38198.12

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	9155.34	38409.36
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9155.34	38409.36
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	1198.12
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	1198.12

**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 19
<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**

Full Name (Last, First, Middle Initial) <b>A. Debra Suzanne Barrett</b>		Date of Receipt MM / DD / YYYY 04 / 03 / 2015 <b>Transaction ID : AA78B5FA4EA584BF8A77</b>
Mailing Address 4619 Chase Avenue		Amount of Each Receipt this Period 150.00
City Bethesda	State MD	Zip Code 20814-3525
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation SVP, Global Gov Aff & Pub Pol
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00	

Full Name (Last, First, Middle Initial) <b>B. Debra Suzanne Barrett</b>		Date of Receipt MM / DD / YYYY 04 / 17 / 2015 <b>Transaction ID : ACE30C0707ADF462C806</b>
Mailing Address 4619 Chase Avenue		Amount of Each Receipt this Period 150.00
City Bethesda	State MD	Zip Code 20814-3525
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation SVP, Global Gov Aff & Pub Pol
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name (Last, First, Middle Initial) <b>C. Denise Ann Bradley</b>		Date of Receipt MM / DD / YYYY 04 / 03 / 2015 <b>Transaction ID : A2899540A9D714690A55</b>
Mailing Address 116 Hanover Ave		Amount of Each Receipt this Period 38.50
City North Wales	State PA	Zip Code 19454-1631
FEC ID number of contributing federal political committee. C	Name of Employer Teva Pharmaceuticals	Occupation SVP, Global Corp Reputation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 269.50	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	338.50
<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 7 OF 19  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEVA PAC**

Full Name (Last, First, Middle Initial)  
**A. Denise Ann Bradley**  
 Mailing Address 116 Hanover Ave  
 City State Zip Code  
 North Wales PA 19454-1631  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Teva Pharmaceuticals SVP, Global Corp Reputation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 308.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2015  
**Transaction ID : AFBF9A63E80144ECDBED**  
 Amount of Each Receipt this Period  
 38.50

Full Name (Last, First, Middle Initial)  
**B. Maureen M Cavanaugh**  
 Mailing Address 1090 Horsham Road  
 P.O. Box 1090  
 City State Zip Code  
 North Wales PA 19454-0090  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Teva Pharmaceuticals SVP, US Generics Sales & Mktg  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2015  
**Transaction ID : A021FF5D4665441AE964**  
 Amount of Each Receipt this Period  
 100.00

Full Name (Last, First, Middle Initial)  
**C. Maureen M Cavanaugh**  
 Mailing Address 1090 Horsham Road  
 P.O. Box 1090  
 City State Zip Code  
 North Wales PA 19454-0090  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Teva Pharmaceuticals SVP, US Generics Sales & Mktg  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2015  
**Transaction ID : A086A4ED3CFC74E98B29**  
 Amount of Each Receipt this Period  
 100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 238.50  
**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 8 OF 19
<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. Michael Duane Dearborn**  
Full Name (Last, First, Middle Initial)

Mailing Address 750 Kellers Church Rd  
PO Box 145

City Bedminster State PA Zip Code 18910-0145

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 ▼ 420.00

Date of Receipt 04 / 03 / 2015  
**Transaction ID : A1EA4D4E70D5C4B48A6B**

Amount of Each Receipt this Period 60.00

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

Mailing Address 750 Kellers Church Rd  
PO Box 145

City Bedminster State PA Zip Code 18910-0145

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 ▼ 480.00

Date of Receipt 04 / 17 / 2015  
**Transaction ID : A157AEB7FBB404DD1BAA**

Amount of Each Receipt this Period 60.00

**C. Michael M Derkacz**  
Full Name (Last, First, Middle Initial)

Mailing Address 1270 Farm Road

City Berwyn State PA Zip Code 19312-2000

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 ▼ 350.00

Date of Receipt 04 / 03 / 2015  
**Transaction ID : A3B04F36E6F4D4F5F88D**

Amount of Each Receipt this Period 50.00

**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 9 OF 19
	<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. Michael M Derkacz**  
Full Name (Last, First, Middle Initial)

Mailing Address 1270 Farm Road

City Berwyn State PA Zip Code 19312-2000

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 ▼ **400.00**

Date of Receipt **04 / 17 / 2015**

**Transaction ID : ADD49649D27674A8BBD2**

Amount of Each Receipt this Period **50.00**

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

Mailing Address 1665 Tuckerstown Rd

City Dresher State PA Zip Code 19025-1306

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 ▼ **525.00**

Date of Receipt **04 / 03 / 2015**

**Transaction ID : A99A79DE2D2FD46D28EF**

Amount of Each Receipt this Period **75.00**

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

Mailing Address 1665 Tuckerstown Rd

City Dresher State PA Zip Code 19025-1306

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 ▼ **600.00**

Date of Receipt **04 / 17 / 2015**

**Transaction ID : AB42447342B404B67862**

Amount of Each Receipt this Period **75.00**

**SUBTOTAL** of Receipts This Page (optional)..... **200.00**

**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 19
<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 5224 SW 159 Ave

City Miramar	State FL	Zip Code 33027-4993
-----------------	-------------	------------------------

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 ▼ **565.39**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

**Transaction ID : A9E741D4B09A140908E2**

Amount of Each Receipt this Period  

80.77
-------

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

Mailing Address 5224 SW 159 Ave

City Miramar	State FL	Zip Code 33027-4993
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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 ▼ **646.16**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2015

**Transaction ID : A455F4D6E07374892A1F**

Amount of Each Receipt this Period  

80.77
-------

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

Mailing Address 2906 West Linden Ave.

City Nashville	State TN	Zip Code 37212-4713
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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 ▼ **700.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	03	/	2015

**Transaction ID : A978829FF317F47C697A**

Amount of Each Receipt this Period  

100.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>261.54</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 OF 19
	<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. Robert Kincaid**  
Full Name (Last, First, Middle Initial)

Mailing Address 2906 West Linden Ave.

City Nashville State TN Zip Code 37212-4713

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 ▼ **800.00**

Date of Receipt **04 / 17 / 2015**

**Transaction ID : A7B284ADFEAE7422CA98**

Amount of Each Receipt this Period **100.00**

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

Mailing Address 112 Mountain Oaks Road

City Yardley State PA Zip Code 19067-6026

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

Name of Employer Teva Pharmaceuticals Occupation SVP HRBP - GGM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt **04 / 03 / 2015**

**Transaction ID : AF940C7059E454D2E95E**

Amount of Each Receipt this Period **35.00**

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

Mailing Address 112 Mountain Oaks Road

City Yardley State PA Zip Code 19067-6026

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

Name of Employer Teva Pharmaceuticals Occupation SVP HRBP - GGM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt **04 / 17 / 2015**

**Transaction ID : A2B66962BE3B84219A88**

Amount of Each Receipt this Period **35.00**

**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 12 OF 19
<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. Michael McHugh**

Mailing Address 14042 Grandview

City Overland Park	State KS	Zip Code 66221-2026
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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 ▼  
245.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2015

**Transaction ID : ABD681BCB00554526898**

Amount of Each Receipt this Period  
35.00

Full Name (Last, First, Middle Initial)  
**B. Michael McHugh**

Mailing Address 14042 Grandview

City Overland Park	State KS	Zip Code 66221-2026
-----------------------	-------------	------------------------

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 ▼  
280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 17 / 2015

**Transaction ID : A59AF62498EB24745987**

Amount of Each Receipt this Period  
35.00

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

Mailing Address 11402 W 161st Terrace

City Overland Park	State KS	Zip Code 66062-7807
-----------------------	-------------	------------------------

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

Name of Employer Teva Pharmaceuticals	Occupation Pres & CEO N America Generics
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 03 / 2015

**Transaction ID : A6B5F5416583C4F4FB33**

Amount of Each Receipt this Period  
40.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 19
	<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. Brendan P O'Grady**

Mailing Address 11402 W 161st Terrace

City Overland Park State KS Zip Code 66062-7807

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

Name of Employer Teva Pharmaceuticals Occupation Pres & CEO N America Generics

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 17 / 2015**

**Transaction ID : A85F8600C92DF41F2A04**

Amount of Each Receipt this Period  
**40.00**

Full Name (Last, First, Middle Initial)  
**B. Douglas Percell**

Mailing Address 2577 Tequesta

City Tustin State CA Zip Code 92782-1182

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 ▼ **280.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 03 / 2015**

**Transaction ID : A2570E03432464203968**

Amount of Each Receipt this Period  
**40.00**

Full Name (Last, First, Middle Initial)  
**C. Douglas Percell**

Mailing Address 2577 Tequesta

City Tustin State CA Zip Code 92782-1182

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 ▼ **320.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 17 / 2015**

**Transaction ID : A1EB396E9C9D94290A19**

Amount of Each Receipt this Period  
**40.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>120.00</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 14 OF 19
<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**

Mailing Address 2225 W. Rockwell Dr

City Chandler State AZ Zip Code 85224-8360

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 ▼ **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 03 / 2015**

Transaction ID : **A8BC91B98567C4E42BEE**

Amount of Each Receipt this Period  
**30.00**

Full Name (Last, First, Middle Initial)  
**B. Thomas P Powers**

Mailing Address 2225 W. Rockwell Dr

City Chandler State AZ Zip Code 85224-8360

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 ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 17 / 2015**

Transaction ID : **A5DB7B54DD71C436D9B7**

Amount of Each Receipt this Period  
**30.00**

Full Name (Last, First, Middle Initial)  
**C. Paul Rittman**

Mailing Address 3988 Powell Rd

City Chester Springs State PA Zip Code 19425-3854

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

Name of Employer Teva Pharmaceuticals Occupation VP & GM, Teva Oncology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 03 / 2015**

Transaction ID : **A56D1980626B54614BEE**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **110.00**

**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 19
	<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. Paul Rittman**  
Full Name (Last, First, Middle Initial)

Mailing Address 3988 Powell Rd

City Chester Springs State PA Zip Code 19425-3854

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

Name of Employer Teva Pharmaceuticals Occupation VP & GM, Teva Oncology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2015

**Transaction ID : AE75AEB59D7F64189B9A**

Amount of Each Receipt this Period  
 50.00

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

Mailing Address 6090 Southlake Drive

City Parkville State MO Zip Code 64152-7214

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 ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 03 / 2015

**Transaction ID : A9FCA7718862A4CF0985**

Amount of Each Receipt this Period  
 30.00

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

Mailing Address 6090 Southlake Drive

City Parkville State MO Zip Code 64152-7214

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 ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 17 / 2015

**Transaction ID : A90B09867BD494539B88**

Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110.00

**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 19
	<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**

Full Name (Last, First, Middle Initial) <b>A. Mark W Salyer</b>		Date of Receipt MM / DD / YYYY 04 / 03 / 2015 <b>Transaction ID : AAC738C70AD8A4833879</b>
Mailing Address 11 Goldfinch Cir		Amount of Each Receipt this Period 50.00
City Phoenixville	State PA	Zip Code 19460-1001
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation GM, Teva Respiratory	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B. Mark W Salyer</b>		Date of Receipt MM / DD / YYYY 04 / 17 / 2015 <b>Transaction ID : AE2C11114BBA74064907</b>
Mailing Address 11 Goldfinch Cir		Amount of Each Receipt this Period 50.00
City Phoenixville	State PA	Zip Code 19460-1001
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation GM, Teva Respiratory	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Woodie Lynn Smith Jr.</b>		Date of Receipt MM / DD / YYYY 04 / 03 / 2015 <b>Transaction ID : AD9523A3D8C604541BDC</b>
Mailing Address 555 Calmwater Lane		Amount of Each Receipt this Period 30.00
City Alpharetta	State GA	Zip Code 30022-8107
FEC ID number of contributing federal political committee. C		
Name of Employer Teva Pharmaceuticals	Occupation Sr Sales Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 19
	<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. Woodie Lynn Smith Jr.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 555 Calmwater Lane  
City Alpharetta State GA Zip Code 30022-8107  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Teva Pharmaceuticals Occupation Sr Sales Specialist  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 17 / 2015  
**Transaction ID : A1FCF0625337545AEA1F**  
Amount of Each Receipt this Period 30.00

**B. Fred L Vitale**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6 Ashwood Lane  
City Malvern State PA Zip Code 19355-9001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Teva Pharmaceuticals Occupation VP, Marketing  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 270.00

Date of Receipt 04 / 03 / 2015  
**Transaction ID : A71D6F8E9017D417DA2F**  
Amount of Each Receipt this Period 10.00

**C. Fred L Vitale**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6 Ashwood Lane  
City Malvern State PA Zip Code 19355-9001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Teva Pharmaceuticals Occupation VP, Marketing  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.00

Date of Receipt 04 / 17 / 2015  
**Transaction ID : AC2B5638FB9F7475E8DC**  
Amount of Each Receipt this Period 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50.00  
**TOTAL** This Period (last page this line number only)..... ▶ 2008.54

# 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. GUTHRIE FOR CONGRESS

Mailing Address PO BOX 9639

City Bowling Green State KY Zip Code 42102-9639

Purpose of Disbursement

Candidate Name  
**Rep. Brett Guthrie**

Office Sought:  House  
 Senate  
 President  
State: KY District: 02

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2015

Transaction ID : B9B4FBFC208E6414B971

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

## B. TIBERI FOR CONGRESS

Mailing Address 2931 E DUBLIN GRANVILLE ROAD  
SUITE 190

City COLUMBUS State OH Zip Code 43231

Purpose of Disbursement

Candidate Name  
**Rep. Patrick J Tiberi**

Office Sought:  House  
 Senate  
 President  
State: OH District: 12

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2015

Transaction ID : B00374D0F31DD43DDB89

Amount of Each Disbursement this Period

1000.00
---------

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) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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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)..... ▶

3500.00
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3500.00
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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)

Grid for line numbers 21b through 30b, with line 29 selected.

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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. Friends of Joe Scarnati
Full Name (Last, First, Middle Initial)
Mailing Address 410 Main Street
City Brockway State PA Zip Code 15824-1325
Purpose of Disbursement Political Contribution
Candidate Name
Office Sought: House
Disbursement For: 2015
Primary General
Other (specify) Other2015
Date of Disbursement 04 / 14 / 2015
Transaction ID : B883546C9ACC64B3392B
Amount of Each Disbursement this Period 1000.00

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement
Candidate Name
Office Sought: House
Disbursement For:
Primary General
Other (specify)
Date of Disbursement
Amount of Each Disbursement this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
Purpose of Disbursement
Candidate Name
Office Sought: House
Disbursement For:
Primary General
Other (specify)
Date of Disbursement
Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... 1000.00
TOTAL This Period (last page this line number only)..... 1000.00