

**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)

**Lundbeck LLC Employee Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Lance for Congress**

Mailing Address P.O. Box 225

City State Zip Code  
Colonia NJ 07067

Purpose of Disbursement  
Contribution

011

Candidate Name

**Leonard Lance**

Category/  
Type

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	1	5

**Transaction ID : B575495**

Amount of Each Disbursement this Period

-	2	5	0	0	0
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Voided: Original check dated 06/11/15

Full Name (Last, First, Middle Initial)

**B. Wyden for Senate**

Mailing Address P.O. Box 3498

City State Zip Code  
Portland OR 97208

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ron Wyden**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: OR District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	5

**Transaction ID : B582189**

Amount of Each Disbursement this Period

2	5	0	0	0
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Full Name (Last, First, Middle Initial)

**C. Tim Murphy for Congress**

Mailing Address P.O. Box 24551

City State Zip Code  
Pittsburgh PA 15234

Purpose of Disbursement  
Contribution

011

Candidate Name

**Tim Murphy**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District: 18

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	5

**Transaction ID : B584340**

Amount of Each Disbursement this Period

2	5	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2	5	0	0	0
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1	4	5	0	0
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