

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
Mylan Laboratories, Inc. PAC/MYPAC

ADDRESS (number and street) 1500 Corporate Dr.
Suite 400
 Check if different than previously reported. (ACC)
Cannonsburg PA 15317

2. **FEC IDENTIFICATION NUMBER** C00332395
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 01 01 2007 through 06 30 2007

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 Leah Summers

Signature of Treasurer Electronically Filed by Leah Summers Date 07 26 2007

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**

Write or Type Committee Name
Mylan Laboratories, Inc. PAC/MYPAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">88994.33</td></tr></table>	88994.33
Y	Y	Y	Y									
2	0	0	7									
88994.33												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">88999.33</td></tr></table>	88999.33										
88999.33												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">49491.04</td></tr></table>	49491.04	<table border="1" style="width: 100%;"><tr><td align="right">49491.04</td></tr></table>	49491.04								
49491.04												
49491.04												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">138490.37</td></tr></table>	138490.37	<table border="1" style="width: 100%;"><tr><td align="right">138485.37</td></tr></table>	138485.37								
138490.37												
138485.37												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">40016.68</td></tr></table>	40016.68	<table border="1" style="width: 100%;"><tr><td align="right">40016.68</td></tr></table>	40016.68								
40016.68												
40016.68												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">98473.69</td></tr></table>	98473.69	<table border="1" style="width: 100%;"><tr><td align="right">98468.69</td></tr></table>	98468.69								
98473.69												
98468.69												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
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

Mylan Laboratories, Inc. PAC/MYPAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	30625.00	30625.00
(i) Itemized (use Schedule A)	18866.04	18866.04
(ii) Unitemized	49491.04	49491.04
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	49491.04	49491.04
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))	49491.04	49491.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	49491.04	49491.04

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) 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.....	39500.00	39500.00
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	16.68	16.68
(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))	16.68	16.68
29. Other Disbursements.....	500.00	500.00
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))..	40016.68	40016.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	40016.68	40016.68

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)	49491.04	49491.04
34. Total Contribution Refunds (from Line 28(d))	16.68	16.68
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	49474.36	49474.36
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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 23
	<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Edward J Borkowski		Date of Receipt M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 0 7	
Mailing Address 1210 Turnberry Dr		Transaction ID: 18331677	
City Pittsburgh	State PA	Zip Code 15241-2943	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Laboratories Inc.	Occupation Division Administration		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Russell F Piro		Date of Receipt M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 7	
Mailing Address 153 Canyon Rd		Transaction ID: 18652508	
City Morgantown	State WV	Zip Code 26508-9037	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Pharmaceuticals	Occupation Manufacturing Management		
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. John Odonnell		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 2 / 2 0 0 7	
Mailing Address 24 Heather Drive		Transaction ID: 19497095	
City Morgantown	State WV	Zip Code 26505	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Pharmaceuticals Inc.	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	10300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 23
	<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Stuart A Williams		Date of Receipt M M / D D / Y Y Y Y 05 / 27 / 2007	
Mailing Address 2189 Meadowmont Dr		Transaction ID: 20433375	
City State Zip Code Pittsburgh PA 15241-3219	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Laboratories Inc.	Occupation Division Administration		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Scot D Lehman		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address 140 Crescent Dr		Transaction ID: PR1120562311426	
City State Zip Code Pittsburgh PA 15228-1050	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Laboratories Inc.	Occupation Business Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$0.00)	

Full Name (Last, First, Middle Initial) C. Beth A Pratt		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address 101 Hamilton St		Transaction ID: PR1120562511426	
City State Zip Code Jefferson PA 15344-4177	Amount of Each Receipt this Period 240.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Laboratories Inc.	Occupation Corp Human Resources		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		
		P/R Deduction (\$0.00)	

SUBTOTAL of Receipts This Page (optional) ▶	5540.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 23
	<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Daniel C. Rizzo		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1362360811426	
Mailing Address 1758 Waterford Ct		Amount of Each Receipt this Period 600.00	
City Pittsburgh	State PA	Zip Code 15241-3151	P/R Deduction (\$0.00)
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Laboratories Inc.	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) B. Joy M Gaetano		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1362360911426	
Mailing Address 100 Highpointe Drive		Amount of Each Receipt this Period 600.00	
City Pittsburgh	State PA	Zip Code 15220-1828	P/R Deduction (\$0.00)
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Laboratories Inc.	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) C. Dyanna L Bonnette		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575591211426	
Mailing Address PO Box 710		Amount of Each Receipt this Period 420.00	
City Arthurdale	State WV	Zip Code 26520-0710	P/R Deduction (\$0.00)
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Pharmaceuticals	Occupation Packaging		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00		

SUBTOTAL of Receipts This Page (optional) ▶	1620.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 23
	<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Donald A Bruyette		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575593611426	
Mailing Address 35 Country Club Estates		Amount of Each Receipt this Period 325.00	
City Swanton	State VT	Zip Code 05488-3008	P/R Deduction (\$0.00)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 325.00	
Name of Employer Mylan Technologies Inc.	Occupation Pharmaceutical QA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Paul B Campbell		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575595411426	
Mailing Address 301 Scarlet Peak Ct		Amount of Each Receipt this Period 300.00	
City Cranberry Twp	State PA	Zip Code 16066-4845	P/R Deduction (\$0.00)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 300.00	
Name of Employer Mylan Laboratories Inc.	Occupation Corp Finance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Daniel MP Caron		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575596111426	
Mailing Address 288 Lakeside Drive		Amount of Each Receipt this Period 650.00	
City Morgantown	State WV	Zip Code 26508-5604	P/R Deduction (\$0.00)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 650.00	
Name of Employer Mylan Technologies Inc.	Occupation Business Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1275.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 23
	<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. William J Coseo		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575601211426	
Mailing Address 24 Prospect St		Amount of Each Receipt this Period 650.00	
City Saint Albans	State VT	Zip Code 05478-1509	P/R Deduction (\$0.00)
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Technologies Inc.	Occupation Information Systems		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name (Last, First, Middle Initial) B. Virginia C Cosner		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575601311426	
Mailing Address 110 Lough St		Amount of Each Receipt this Period 360.00	
City Westover	State WV	Zip Code 26501-3805	P/R Deduction (\$0.00)
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Pharmaceuticals	Occupation Label Control Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) C. Eric H Davis		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575603611426	
Mailing Address 12 Cobun Ridge		Amount of Each Receipt this Period 480.00	
City Morgantown	State WV	Zip Code 26508-4015	P/R Deduction (\$0.00)
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Laboratories Inc.	Occupation R & D Administration		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00		

SUBTOTAL of Receipts This Page (optional) ▶	1490.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 23
	<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Daniel W Eby		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575608411426
Mailing Address 407 Laura Lee Ests		Amount of Each Receipt this Period 300.00
City Morgantown	State WV	P/R Deduction (\$0.00)
Zip Code 26508-4822	FEC ID number of contributing federal political committee. C	
Name of Employer UDL Laboratories, Inc.-IL	Occupation Sales - Outside	
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) B. Mark W Fitch		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575610711426
Mailing Address 311 Lakeview Dr		Amount of Each Receipt this Period 420.00
City Morgantown	State WV	P/R Deduction (\$0.00)
Zip Code 26508-8080	FEC ID number of contributing federal political committee. C	
Name of Employer Mylan Pharmaceuticals Inc.	Occupation Manufacturing Administration	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) C. Gary D Freed		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575612611426
Mailing Address 1331 Goshen Rd		Amount of Each Receipt this Period 360.00
City Morgantown	State WV	P/R Deduction (\$0.00)
Zip Code 26508-4775	FEC ID number of contributing federal political committee. C	
Name of Employer Mylan Pharmaceuticals	Occupation Manufacturing Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

SUBTOTAL of Receipts This Page (optional) ▶	1080.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 23
	<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. James A Fullmer		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575613311426
Mailing Address 3464 Stewartstown Rd		Amount of Each Receipt this Period 600.00
City Morgantown	State WV	Zip Code 26508-1474
FEC ID number of contributing federal political committee. C		P/R Deduction (\$0.00)
Name of Employer Mylan Pharmaceuticals	Occupation Maintenance Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. John F Hamrick		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575619211426
Mailing Address 101 Citadel Rd		Amount of Each Receipt this Period 1200.00
City Morgantown	State WV	Zip Code 26505-3614
FEC ID number of contributing federal political committee. C		P/R Deduction (\$0.00)
Name of Employer Mylan Pharmaceuticals	Occupation Manufacturing Management	
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) C. John Hango		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575619311426
Mailing Address 471 Potato Hill Rd		Amount of Each Receipt this Period 650.00
City Enosburg Falls	State VT	Zip Code 05450-5275
FEC ID number of contributing federal political committee. C		P/R Deduction (\$0.00)
Name of Employer Mylan Technologies Inc.	Occupation Administration	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional) ▶	2450.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 23
	<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Vincent F Mancinelli		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 8157 Charissa's Pl		Transaction ID: PR575635511426
City Roscoe	State IL	Zip Code 61073-7579
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 240.00
Name of Employer UDL Laboratories, Inc.-IL	Occupation Administration	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. Andrea B Miller		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 1015 Elm Crest Court		Transaction ID: PR575641111426
City Morgantown	State WV	Zip Code 26508-9048
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 650.00
Name of Employer Mylan Technologies Inc.	Occupation Brand Regulatory Affairs	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) C. Carolyn Myers		Date of Receipt M M / D D / Y Y Y Y Y
Mailing Address 217 Lynn Haven Dr		Transaction ID: PR575645511426
City Pittsburgh	State PA	Zip Code 15228-1820
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1300.00
Name of Employer Mylan Technologies Inc.	Occupation Business Development	P/R Deduction (\$0.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	2190.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 23
	<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Jill M Ondos		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 155 Oak Brook Cir		Transaction ID: PR575648611426	
City Pittsburgh	State PA	Zip Code 15220-4655	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Laboratories Inc.	Occupation Legal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$0.00)	

Full Name (Last, First, Middle Initial) B. Russell J Rackley		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4325 Brettwood Ln		Transaction ID: PR575654911426	
City Morgantown	State WV	Zip Code 26508-4404	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Pharmaceuticals	Occupation Pharmacokinetics		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		
		P/R Deduction (\$0.00)	

Full Name (Last, First, Middle Initial) C. Karen L Reuther		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 452 Rebecca St		Transaction ID: PR575657011426	
City Morgantown	State WV	Zip Code 26505-2249	Amount of Each Receipt this Period 420.00
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Laboratories Inc.	Occupation Treasury		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00		
		P/R Deduction (\$0.00)	

SUBTOTAL of Receipts This Page (optional) ▶	1020.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 23
	<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Ricky V Rodeheaver		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address PO Box 464		Transaction ID: PR575658411426	
City <u>Arthurdale</u>	State <u>WV</u>	Zip Code <u>26520-0464</u>	Amount of Each Receipt this Period _____ 240.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Mylan Pharmaceuticals Inc.	Occupation Maintenance Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 240.00		
		P/R Deduction (\$0.00)	

Full Name (Last, First, Middle Initial) B. Brian S Roman		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 390 Avon Dr		Transaction ID: PR575659211426	
City <u>Pittsburgh</u>	State <u>PA</u>	Zip Code <u>15228-2102</u>	Amount of Each Receipt this Period _____ 420.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Mylan Laboratories Inc.	Occupation Legal		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 420.00		
		P/R Deduction (\$0.00)	

Full Name (Last, First, Middle Initial) C. David B Springgate		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 3957 East Lk		Transaction ID: PR575668411426	
City <u>Morgantown</u>	State <u>WV</u>	Zip Code <u>26508-8673</u>	Amount of Each Receipt this Period _____ 300.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Mylan Laboratories Inc.	Occupation Management and PMO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 300.00		
		P/R Deduction (\$0.00)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 960.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 23
	<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Will A Sullivan		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575670411426	
Mailing Address 302 St Andrews Dr		Amount of Each Receipt this Period 420.00	
City Morgantown	State WV	Zip Code 26508-9202	P/R Deduction (\$0.00)
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Laboratories Inc.	Occupation Clinical Research		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00		

Full Name (Last, First, Middle Initial) B. Leah L Summers		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575670511426	
Mailing Address 129 Hickory Ridge Rd		Amount of Each Receipt this Period 240.00	
City Morgantown	State WV	Zip Code 26508-0942	P/R Deduction (\$0.00)
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Laboratories Inc.	Occupation Governmental Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. Robert S Tighe		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR575674211426	
Mailing Address 1253 Kings Road		Amount of Each Receipt this Period 240.00	
City Morgantown	State WV	Zip Code 26508-9155	P/R Deduction (\$0.00)
FEC ID number of contributing federal political committee. C			
Name of Employer Mylan Pharmaceuticals Inc.	Occupation Corp Finance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)	30625.00

**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 18 / 23

<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Stabenow For Us Senate		Transaction ID: 19239865 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7
Mailing Address PO Box 4945		Amount of Each Disbursement this Period 5000.00
City East Lansing State MI Zip Code 48826	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. Debbie Stabenow		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 2	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Stabenow For Us Senate		Transaction ID: 19240015 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7
Mailing Address PO Box 4945		Amount of Each Disbursement this Period 5000.00
City East Lansing State MI Zip Code 48826	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Sen. Debbie Stabenow		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 2	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. People For English		Transaction ID: 19313330 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 7
Mailing Address PO Box 1940		Amount of Each Disbursement this Period 3000.00
City Erie State PA Zip Code 16507	011 Category/ Type	
Purpose of Disbursement		
Candidate Name Rep. Phil English		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 3	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	13000.00
TOTAL This Period (last page this line number only) ▶

**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 19 / 23

<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Friends Of John McCain		Transaction ID: 19313328	
Mailing Address 211 North Union Street Suite 200		Date of Disbursement 03 / 09 / 2007	
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Sen. John McCain			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AZ	District: 1		

Full Name (Last, First, Middle Initial) B. Tom Allen For Congress Committee		Transaction ID: 19307179	
Mailing Address P.O. Box 17766		Date of Disbursement 03 / 09 / 2007	
City Portland	State ME	Zip Code 04112	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name Rep. Thomas Allen			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: ME	District: 1		

Full Name (Last, First, Middle Initial) C. Generic Pharmaceutical Association		Transaction ID: 20433479	
Mailing Address 2300 CLARENDON BOULEVARD SUITE 400		Date of Disbursement 05 / 17 / 2007	
City ARLINGTON	State VA	Zip Code 22201	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement		011 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional)	11000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 23

<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Friends Of John Thune		Transaction ID: 20433476 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7	
Mailing Address 224 North Phillips Avenue Ste 210		Amount of Each Disbursement this Period 2000.00	
City State Zip Code Sioux Falls SD 57104	011 Category/ Type		
Purpose of Disbursement			
Candidate Name Sen. John Thune			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 2	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends Of Senator Rockefeller		Transaction ID: 20433482 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address PO Box 1909		Amount of Each Disbursement this Period 3000.00	
City State Zip Code Charleston WV 25327	011 Category/ Type		
Purpose of Disbursement			
Candidate Name Sen. John Rockefeller, IV			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends Of Senator Rockefeller		Transaction ID: 20433483 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address PO Box 1909		Amount of Each Disbursement this Period 5000.00	
City State Zip Code Charleston WV 25327	011 Category/ Type		
Purpose of Disbursement			
Candidate Name Sen. John Rockefeller, IV			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 2	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	10000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 21 / 23

<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Nathan Deal For Congress		Transaction ID: 20433485 Date of Disbursement 06 / 05 / 2007
Mailing Address PO Box 902		Amount of Each Disbursement this Period 1500.00
City Gainesville	State GA	
Zip Code 30503		
Purpose of Disbursement		
Candidate Name Rep. Nathan Deal		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA District: 10		

Full Name (Last, First, Middle Initial) B. Friends Of Sherrod Brown		Transaction ID: 20433487 Date of Disbursement 06 / 08 / 2007
Mailing Address 2280 Kresge Drive Suite 800		Amount of Each Disbursement this Period 1000.00
City Amherst	State OH	
Zip Code 44001		
Purpose of Disbursement		
Candidate Name Rep. Sherrod Brown		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 13		

Full Name (Last, First, Middle Initial) C. Pallone For Congress		Transaction ID: 20587545 Date of Disbursement 06 / 27 / 2007
Mailing Address PO Box 3176		Amount of Each Disbursement this Period 1000.00
City Long Branch	State NJ	
Zip Code 07740		
Purpose of Disbursement		
Candidate Name Rep. Frank Pallone, Jr.		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 6		

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	

**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 22 / 23

<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)
Mylan Laboratories, Inc. PAC/MYPAC

A. Full Name (Last, First, Middle Initial)
Congressman Waxman Campaign Committee

Mailing Address 6380 Wilshire Blvd. #1612

City State Zip Code
Los Angeles CA 90048

Purpose of Disbursement

Candidate Name
Rep. Henry Waxman

Office Sought: House
 Senate
 President
State: CA District: 30

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: 20587640

Date of Disbursement

06 / 27 / 2007

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

39500.00

**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 23 / 23

<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)
Mylan Laboratories, Inc. PAC/MYPAC

Full Name (Last, First, Middle Initial) A. Friends of Joe DeLong		Transaction ID: 19080646 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 7	
Mailing Address 409 Laurel Drive		Amount of Each Disbursement this Period 500.00	
City Weirton State WV Zip Code 26062	Purpose of Disbursement Joe DeLong, STATE HOUSE 01st WV	011 Category/ Type	
Candidate Name WV Del. Joe DeLong	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV District: 1	Joe DeLong, STATE HOUSE 01st WV		

SUBTOTAL of Disbursements This Page (optional) ►

500.00

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

500.00