

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 51
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
**Mylan Inc. Political Action Committee (MYPAC)**

**A. WASHENITZ II, FRANKLIN, C, , II**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 60 JOHN DEERE DR

City FAIRMONT	State WV	Zip Code 26554-7500
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Mylan Inc.	Occupation (for Individual) Senior Director Global Sales E
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

**Transaction ID : PR1737003152738**

Amount of Each Receipt this Period  
45.00

Memo Item

P/R Deduction (\$15.00 Bi-Weekly)

**B. Bailey, Stewart, L, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 117 Farmstead Dr

City Reidsville	State NC	Zip Code 27320-9084
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Mylan Pharmaceuticals Inc.	Occupation (for Individual) Shipping Supervisor
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

**Transaction ID : PR1774681052738**

Amount of Each Receipt this Period  
75.00

Memo Item

P/R Deduction (\$25.00 Bi-Weekly)

**C. INTERLINI, JESSICA, L, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 SCHOOL ST

City JOHNSTON	State RI	Zip Code 02919-6715
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Mylan Pharmaceuticals Inc.	Occupation (for Individual) National Account Manager
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2016

**Transaction ID : PR1816653852738**

Amount of Each Receipt this Period  
30.00

Memo Item

P/R Deduction (\$10.00 Bi-Weekly)

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	