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

40 FOR LINE NUMBER: PAGE 20 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c Detailed Summary Page 13 14 15 16

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 Inc. Political Action Committee (MYPAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Weaver, Patrick, , , Date of Receipt Mailing Address 304 Tranquility Way 2018 City Zip Code State Transaction ID: PR2362415761842 WV Morgantown 26508-8639 Amount of Each Receipt this Period FEC ID number of contributing C 60.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mylan Specialty L.P. Head of Respiratory Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$30.00 Bi-Weekly) 570.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ALLEN, ELIZABETH, ANNE, Date of Receipt Mailing Address 6308 Towles Road 2018 City State Zip Code Transaction ID: PR2362420761842 NC Wilmington 28409-2121 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Mylan Institutional Inc. (Rockford) Key Account Manager Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$100.00 Bi-Weekly) Other (specify) 1900.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Ostrovskaya, Olga, P., , Date of Receipt Mailing Address 31 woodland ave 30 2018 City Zip Code State Transaction ID : PR2471890561842 NY Roslyn 11576 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Medical Director** Mylan Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$25.00 Bi-Weekly) 350.00 Other (specify) 310.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7