

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
Cephalon, Inc. Employees' Political Action Committee

ADDRESS (number and street) 41 Moores Road
 Check if different than previously reported. (ACC)
Frazer PA 19355

2. **FEC IDENTIFICATION NUMBER** C00378794
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 07 01 2007 through 12 31 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 John M Farah, Jr.
Signature of Treasurer Electronically Filed by John M Farah, Jr. Date 01 22 2008

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 **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Cephalon, Inc. Employees' Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

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		57015.95
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	69298.95									
(c) Total Receipts (from Line 19)	21908.00	49691.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	91206.95	106706.95								
7. Total Disbursements (from Line 31)	15000.00	30500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	76206.95	76206.95								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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
Cephalon, Inc. Employees' Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

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	20700.00	40975.00
(i) Itemized (use Schedule A)	1208.00	8716.00
(ii) Unitemized	21908.00	49691.00
(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)	21908.00	49691.00
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))	21908.00	49691.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	21908.00	49691.00

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.....	12500.00	26500.00
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	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.....	2500.00	4000.00
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))..	15000.00	30500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15000.00	30500.00

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	21908.00	49691.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21908.00	49691.00
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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Cephalon, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial)
KATHLEEN VESTAL

Mailing Address 8159 LARKIN LANE

City State Zip Code
VIENNA VA 22182

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

Name of Employer Occupation
Cephalon, Inc. Territory Sales Specialist

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

Transaction ID: PR1150527012673

Amount of Each Receipt this Period
120.00

P/R Deduction (\$10.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
MARK G MACRIDES

Mailing Address 7145 SHADY HOLLOW RD
N.W.

City State Zip Code
CANTON, OH 44718

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

Name of Employer Occupation
Cephalon, Inc. Territory Sales Specialist

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

Transaction ID: PR1150527112673

Amount of Each Receipt this Period
120.00

P/R Deduction (\$10.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
JOHN E. BUSHMAN

Mailing Address 2113 E 13TH ST

City State Zip Code
DAVENPORT, IA 52803

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

Name of Employer Occupation
Cephalon, Inc. Territory Sales Specialist

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

Transaction ID: PR1150527312673

Amount of Each Receipt this Period
120.00

P/R Deduction (\$10.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► **360.00**

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: PAGE 7 / 35

(check only one)

<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)
Cephalon, Inc. Employees' Political Action Committee

A.

Full Name (Last, First, Middle Initial)
TIMOTHY G SWEENEY

Mailing Address 6 RIVERBEND ROAD

City State Zip Code
OCEANPORT, NJ 07757

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Cephalon, Inc. Area Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y Y

Transaction ID: PR1150527412673

Amount of Each Receipt this Period 120.00

P/R Deduction (\$10.00 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
CORNELIUS GRIGGS

Mailing Address 2645 GOLF ISLAND RD

City State Zip Code
ELLICOTT CITY, MD 21042

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Cephalon, Inc. Area Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y Y

Transaction ID: PR1150527512673

Amount of Each Receipt this Period 120.00

P/R Deduction (\$10.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
MICHAEL L PEARCE

Mailing Address 1643 WHISPERING HOLLOW COURT

City State Zip Code
WILDWOOD, MO 63038

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Cephalon, Inc. Territory Sales Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt M M / D D / Y Y Y Y Y

Transaction ID: PR1150527612673

Amount of Each Receipt this Period 120.00

P/R Deduction (\$10.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) 360.00

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: PAGE 8 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Cephalon, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial)
JEFFREY J FILE

Mailing Address 1834 E DAVA DR

City State Zip Code
TEMPE AZ 85283-4200

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

Name of Employer Occupation
Cephalon, Inc. Area Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1150527812673

Amount of Each Receipt this Period
300.00

P/R Deduction (\$25.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
KRISTEN LEE R. MERRIAM

Mailing Address 100 GALWAY TRAIL

City State Zip Code
BIRMINGHAM, AL 35242

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

Name of Employer Occupation
Cephalon, Inc. Territory Sales Specialist

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

Transaction ID: PR1150528012673

Amount of Each Receipt this Period
120.00

P/R Deduction (\$10.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
THOMAS CLARK

Mailing Address 1462 KNOB HILL CIR

City State Zip Code
EVANS, GA 30809

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

Name of Employer Occupation
Cephalon, Inc. Regional Director

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

Transaction ID: PR1150528112673

Amount of Each Receipt this Period
120.00

P/R Deduction (\$10.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► **540.00**

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: PAGE 9 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Cephalon, Inc. Employees' Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) JOHN T KEYSER</p> <p>Mailing Address 17202 EMERALD CHASE DR</p> <p>City State Zip Code TAMPA, FL 33647</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Cephalon, Inc. Area Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y</p> <p>Transaction ID: PR1150528212673</p> <p>Amount of Each Receipt this Period 120.00</p> <p>P/R Deduction (\$10.00 Semi-Monthly)</p>
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<p>B. Full Name (Last, First, Middle Initial) LESLIE B WEBSTER</p> <p>Mailing Address 2234 BRYTON DRIVE</p> <p>City State Zip Code POWELL, OH 43065</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Cephalon, Inc. Territory Sales Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y</p> <p>Transaction ID: PR1150528612673</p> <p>Amount of Each Receipt this Period 120.00</p> <p>P/R Deduction (\$10.00 Semi-Monthly)</p>
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<p>C. Full Name (Last, First, Middle Initial) CHRIS L. BROWN</p> <p>Mailing Address 14610 CASTLEFORD CT</p> <p>City State Zip Code MILOTHIAN, VA 23113</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Cephalon, Inc. Area Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y</p> <p>Transaction ID: PR1150528812673</p> <p>Amount of Each Receipt this Period 120.00</p> <p>P/R Deduction (\$10.00 Semi-Monthly)</p>
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SUBTOTAL of Receipts This Page (optional)	360.00
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 / 35
	<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)
Cephalon, Inc. Employees' Political Action Committee

A.	Full Name (Last, First, Middle Initial) DAVID Z. SCHATZ	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 723 SOUTH 186TH ST	Transaction ID: PR1150529112673
	City State Zip Code ELKHORN, NE 68022	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Semi-Monthly)
	Name of Employer Occupation Cephalon, Inc. Territory Sales Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) ROBERT M. YOUNGBLOOD	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 5120 ROLLING FAIRWAY DRIVE	Transaction ID: PR1150529312673
	City State Zip Code VALRICO, FL 33596-8220	Amount of Each Receipt this Period 180.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.00 Semi-Monthly)
	Name of Employer Occupation Cephalon, Inc. National Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

C.	Full Name (Last, First, Middle Initial) KEVIN J LANGLOIS	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 4 DEVONSHIRE ROAD	Transaction ID: PR1150530012673
	City State Zip Code ATKINSON, NH 03811-2502	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Semi-Monthly)
	Name of Employer Occupation Cephalon, Inc. Area Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	600.00
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 11 / 35
	<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)
Cephalon, Inc. Employees' Political Action Committee

A.	Full Name (Last, First, Middle Initial) CHRISTOPHER M. BUCHHOLTZ		Date of Receipt
	Mailing Address 6801 TROY LANE, N.		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	MAPLE GROVE	MN	55311-2312
	FEC ID number of contributing federal political committee.		C <input type="text"/>
Name of Employer Cephalon, Inc.		Occupation Area Manager	Transaction ID: PR1150530512673
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 500.00	Amount of Each Receipt this Period <input type="text"/> 200.00
			P/R Deduction (\$25.00 Semi-Monthly)

B.	Full Name (Last, First, Middle Initial) SHAWN R. LALLY		Date of Receipt
	Mailing Address 461 GATEFORD DR.		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	BALLWIN,	MO	63021
	FEC ID number of contributing federal political committee.		C <input type="text"/>
Name of Employer Cephalon, Inc.		Occupation Area Manager	Transaction ID: PR1150530912673
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 240.00	Amount of Each Receipt this Period <input type="text"/> 120.00
			P/R Deduction (\$10.00 Semi-Monthly)

C.	Full Name (Last, First, Middle Initial) STEPHEN M. GUIDRY		Date of Receipt
	Mailing Address 3421 DELAMERE DRIVE		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	MATTHEWS,	NC	28104
	FEC ID number of contributing federal political committee.		C <input type="text"/>
Name of Employer Cephalon, Inc.		Occupation Market Development Manager	Transaction ID: PR1150531012673
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 240.00	Amount of Each Receipt this Period <input type="text"/> 120.00
			P/R Deduction (\$10.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 440.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 35
(check only one)

<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)
Cephalon, Inc. Employees' Political Action Committee

A.

Full Name (Last, First, Middle Initial)
WILLIAM A CUNNINGHAM

Mailing Address 12 CITRUS

City LADERA RANCH. State CA Zip Code 92694

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

Name of Employer Cephalon, Inc. Occupation Director Managed Care

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
Transaction ID: PR1150531212673

Amount of Each Receipt this Period: 120.00

P/R Deduction (\$10.00 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
DAVID A. SHIMOKAWA

Mailing Address 1420 W. BELLE PLAINE AVENUE #3W

City CHICAGO State IL Zip Code 60613-1942

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

Name of Employer Cephalon, Inc. Occupation Regional Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: M M / D D / Y Y Y Y Y Y
Transaction ID: PR1150531512673

Amount of Each Receipt this Period: 300.00

P/R Deduction (\$25.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
JOSEPH H. DATIN

Mailing Address 5113 CRESCENTCOVE LN

City MABLETON. State GA Zip Code 30126

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

Name of Employer Cephalon, Inc. Occupation Sr. Director

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
Transaction ID: PR1150531712673

Amount of Each Receipt this Period: 120.00

P/R Deduction (\$10.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ **540.00**

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: PAGE 13 / 35
(check only one)

<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)
Cephalon, Inc. Employees' Political Action Committee

A.

Full Name (Last, First, Middle Initial)
CHARLES A. REINHART III

Mailing Address 1271 CHARLESTON ROAD

City State Zip Code
CHERRY HILL NJ 08034-3133

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

Name of Employer Occupation
Cephalon, Inc. Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1150532112673

Amount of Each Receipt this Period
200.00

P/R Deduction (\$25.00 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
ROBERT S MERRITT

Mailing Address 319 TARBERT DRIVE

City State Zip Code
WEST CHESTER, PA 19382

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

Name of Employer Occupation
Cephalon, Inc. Sr Director Investor Relations

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

Transaction ID: PR1150532312673

Amount of Each Receipt this Period
120.00

P/R Deduction (\$10.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
BRUCE A. RUGGERI

Mailing Address 1202 KILLINGTON CIR

City State Zip Code
WEST CHESTER, PA 19380

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

Name of Employer Occupation
Cephalon, Inc. Director Oncology

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

Transaction ID: PR1150532612673

Amount of Each Receipt this Period
120.00

P/R Deduction (\$10.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ **440.00**

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: PAGE 14 / 35
(check only one)

<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)
Cephalon, Inc. Employees' Political Action Committee

A.

Full Name (Last, First, Middle Initial)
STACEY E. BECKHARDT

Mailing Address 1459 BRADDOCK LANE

City State Zip Code
WYNNEWOOD, PA 19096

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

Name of Employer Occupation
Cephalon, Inc. Sr Manager Product Communications

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

Transaction ID: PR1150532912673

Amount of Each Receipt this Period
120.00

P/R Deduction (\$10.00 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
RUSSELL A. BRIERLEY

Mailing Address 1297 W. KIRKLAND AVE

City State Zip Code
WEST CHESTER, PA 19380-1204

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

Name of Employer Occupation
Cephalon, Inc. Sr Director Developmental Manufacturing

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1150533012673

Amount of Each Receipt this Period
300.00

P/R Deduction (\$25.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
BRET A. DEMYAN

Mailing Address 204 SIDESADDLE PLACE

City State Zip Code
WEST CHESTER, PA 19382

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

Name of Employer Occupation
Cephalon, Inc. Sr Director IT

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

Transaction ID: PR1150533312673

Amount of Each Receipt this Period
120.00

P/R Deduction (\$10.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶ **540.00**

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 / 35
	<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)
Cephalon, Inc. Employees' Political Action Committee

A.	Full Name (Last, First, Middle Initial) JOHN E. OSBORN	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1219 FAIRVILLE ROAD	Transaction ID: PR1150533412673
	City State Zip Code CHADDS FORD PA 19317-7326	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Cephalon, Inc. Exec Vice President	P/R Deduction (\$100.00 Se- mi-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

B.	Full Name (Last, First, Middle Initial) ROBERT T. HRUBIEC	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 655 HARVEY BRIDGE RD P.O. BOX 399	Transaction ID: PR1150533512673
	City State Zip Code UNIONVILLE, PA 19375	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Cephalon, Inc. Vice President	P/R Deduction (\$10.00 Sem- i-Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) CHARLENE TUCKER	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 544 FOXWOOD LANE	Transaction ID: PR1150533612673
	City State Zip Code PAOLI PA 19301-2040	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Cephalon, Inc. Director, Regulatory Medical Writing	P/R Deduction (\$10.00 Sem- i-Monthly)
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)	▶	1440.00
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: PAGE 16 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Cephalon, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial)
ROBERT BRIAN SWITES

Mailing Address 1456 HEATHER RIDGE DRIVE

City State Zip Code
NEWTOWN, PA 18940

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

Name of Employer Occupation
Cephalon, Inc. Sr Manager Technical Services

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1150534012673

Amount of Each Receipt this Period
120.00

P/R Deduction (\$10.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
RYAN BARNES

Mailing Address PMB 320, STE. 148
100 E WHITESTONE BLV

City State Zip Code
CEDAR PARK, TX 78613-6902

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

Name of Employer Occupation
Cephalon, Inc. Regional Director

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1150534112673

Amount of Each Receipt this Period
300.00

P/R Deduction (\$25.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
JOSEPH S. TURI

Mailing Address 1713 YARDLEY DRIVE

City State Zip Code
WEST CHESTER, PA 19380

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

Name of Employer Occupation
Cephalon, Inc. Vice President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1150534412673

Amount of Each Receipt this Period
600.00

P/R Deduction (\$50.00 Semi-Monthly)

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 35
	<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)
Cephalon, Inc. Employees' Political Action Committee

A.	Full Name (Last, First, Middle Initial) JEFFREY A RYDELL	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 247 KEBU RD	Transaction ID: PR1150534512673
	City State Zip Code MT. JULIET, TN 37122	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Semi-Monthly)
	Name of Employer: Cephalon, Inc. Occupation: Associate Director, Healthcare Systems Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) DANIEL W KINSEY	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 904 WOODOAK LANE	Transaction ID: PR1150534612673
	City State Zip Code CHARLESTON WV 25314-1874	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$25.00 Semi-Monthly)
	Name of Employer: Cephalon, Inc. Occupation: Territory Sales Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) ADAM B RONDEAU	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 8073 NORTHRIDGE DR	Transaction ID: PR1150534712673
	City State Zip Code BRIGHTON, MI 48116	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Semi-Monthly)
	Name of Employer: Cephalon, Inc. Occupation: Territory Sales Specialist 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)	540.00
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: PAGE 18 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Cephalon, Inc. Employees' Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) PETER M COOKE</p> <p>Mailing Address 105 GALLAGHER DRIVE</p> <p>City State Zip Code FRANKLIN TN 37064-5771</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Cephalon, Inc. Area Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y</p> <p>Transaction ID: PR1150535012673</p> <p>Amount of Each Receipt this Period 120.00</p> <p>P/R Deduction (\$10.00 Semi-Monthly)</p>
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<p>B. Full Name (Last, First, Middle Initial) DAVID B MUSGRAVE</p> <p>Mailing Address 11525 BOBERG RD</p> <p>City State Zip Code EVANSVILLE IN 47712</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Cephalon, Inc. Territory Sales Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y</p> <p>Transaction ID: PR1150535212673</p> <p>Amount of Each Receipt this Period 120.00</p> <p>P/R Deduction (\$10.00 Semi-Monthly)</p>
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<p>C. Full Name (Last, First, Middle Initial) NADINE F RAUCH</p> <p>Mailing Address 12966 FAIRWAY DR</p> <p>City State Zip Code LEMONT IL 60439-4566</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Cephalon, Inc. Territory Sales Specialist</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 360.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y</p> <p>Transaction ID: PR1150535512673</p> <p>Amount of Each Receipt this Period 180.00</p> <p>P/R Deduction (\$15.00 Semi-Monthly)</p>
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SUBTOTAL of Receipts This Page (optional)	420.00
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 19 / 35
	<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)
Cephalon, Inc. Employees' Political Action Committee

A.	Full Name (Last, First, Middle Initial) CHAD J SIEGALL	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 2850 N SOUTHPORT AVE UNIT #4	Transaction ID: PR1150535812673
	City State Zip Code CHICAGO IL 60657-4141	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$15.00 Semi-Monthly)
	Name of Employer Occupation Cephalon, Inc. Territory Sales Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) ROBERT J. URBAN	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 9 TUNBRIDGE LANE	Transaction ID: PR1150536112673
	City State Zip Code MALVERN PA 19355	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$100.00 Semi-Monthly)
	Name of Employer Occupation Cephalon, Inc. Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2150.00	

C.	Full Name (Last, First, Middle Initial) ETUKUDO O. AKPAITA	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 3066 EAST GRANITE SLOPE LANE	Transaction ID: PR1150536312673
	City State Zip Code SANDY UT 84092	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Semi-Monthly)
	Name of Employer Occupation Anesta Corp. Sr Director Quality Assurance	
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)	1440.00
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: PAGE 20 / 35
(check only one)

<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)
Cephalon, Inc. Employees' Political Action Committee

A.

Full Name (Last, First, Middle Initial)
BRENDA B. THOMPSON

Mailing Address 1160 WILLOW CIRCLE

City State Zip Code
HEBER CITY, UT 84032

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

Name of Employer Anesta Corp. Occupation Assoc Director Materials Management

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

Transaction ID: PR1150536412673

Amount of Each Receipt this Period 120.00

P/R Deduction (\$10.00 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
RANDALL W BALLIETT

Mailing Address 18135 CRESTLINE DR

City State Zip Code
LAKE OSWEGO, OR 97034

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

Name of Employer Cephalon, Inc. Occupation Territory Sales Specialist

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

Transaction ID: PR1150536812673

Amount of Each Receipt this Period 120.00

P/R Deduction (\$10.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
TARA A GUINDON

Mailing Address 619 EAST 1700 ROAD

City State Zip Code
BALDWIN CITY, KS 66006

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

Name of Employer Cephalon, Inc. Occupation Territory Sales Specialist

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

Transaction ID: PR1150537312673

Amount of Each Receipt this Period 120.00

P/R Deduction (\$10.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► **360.00**

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: PAGE 21 / 35
(check only one)

<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)
Cephalon, Inc. Employees' Political Action Committee

A.

Full Name (Last, First, Middle Initial)
KENNETH J. FIORELLI

Mailing Address 1230 CORNERSTONE BLD
APT 354

City State Zip Code
DOWNTOWN PA 19335-5355

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

Name of Employer Occupation
Cephalon, Inc. Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1150537712673

Amount of Each Receipt this Period
300.00

P/R Deduction (\$25.00 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
SHERYL L WILLIAMS

Mailing Address 118 UPLAND TERRACE

City State Zip Code
BALA CYNWYD, PA 19004

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

Name of Employer Occupation
Cephalon, Inc. Sr Director Product Communications

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2150.00

Date of Receipt
M M / D D / Y Y Y Y Y Y

Transaction ID: PR1150537812673

Amount of Each Receipt this Period
1200.00

P/R Deduction (\$100.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
DEBRA J SHERETTE

Mailing Address 1979 EAST M-28

City State Zip Code
MARQUETTE, MI 49855

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

Name of Employer Occupation
Cephalon, Inc. Territory Sales Specialist

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

Transaction ID: PR1150537912673

Amount of Each Receipt this Period
120.00

P/R Deduction (\$10.00 Semi-Monthly)

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Cephalon, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial)
ERNEST L KELLY

Mailing Address 159 PINE LANE

City YARDLEY, State PA Zip Code 19067

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

Name of Employer Cephalon, Inc. Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt [M M] / [D D] / [Y Y Y Y Y]

Transaction ID: PR1150538112673

Amount of Each Receipt this Period 120.00

P/R Deduction (\$10.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
JEFFERSON M MYERS

Mailing Address 7704 GEORGETOWN PIKE

City MCLEAN, State VA Zip Code 22102

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

Name of Employer Cephalon, Inc. Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt [M M] / [D D] / [Y Y Y Y Y]

Transaction ID: PR1150543612673

Amount of Each Receipt this Period 1200.00

P/R Deduction (\$100.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
ROBERT P. ROCHE

Mailing Address 199 S. SPRING MILL

City VILLANOVA, State PA Zip Code 19085-1409

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

Name of Employer Cephalon, Inc. Occupation Exec Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt [M M] / [D D] / [Y Y Y Y Y]

Transaction ID: PR1157783312673

Amount of Each Receipt this Period 200.00

P/R Deduction (\$100.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► 1520.00

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: PAGE 23 / 35

(check only one)

<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)
Cephalon, Inc. Employees' Political Action Committee

A.

Full Name (Last, First, Middle Initial)
JEFFRY L VAUGHT

Mailing Address 206 KATHLEEN WAY

City State Zip Code
GLENMOORE PA 19343-2662

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

Name of Employer Occupation
Cephalon, Inc. Exec Vice President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR1157783412673

Amount of Each Receipt this Period
500.00

P/R Deduction (\$100.00 Se-
mi-Monthly)

B.

Full Name (Last, First, Middle Initial)
J. KEVIN BUCHI

Mailing Address 202 BRIDLE PATH DR

City State Zip Code
NEWARK DE 19711-8308

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

Name of Employer Occupation
Cephalon, Inc. Exec Vice President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR1157783612673

Amount of Each Receipt this Period
200.00

P/R Deduction (\$100.00 Se-
mi-Monthly)

C.

Full Name (Last, First, Middle Initial)
CARL A. SAVINI

Mailing Address 1140 ST. FINEGAN
DRIVE

City State Zip Code
WEST CHESTER PA 19382-2318

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

Name of Employer Occupation
Cephalon, Inc. Exec Vice President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR1157783712673

Amount of Each Receipt this Period
100.00

P/R Deduction (\$100.00 Se-
mi-Monthly)

SUBTOTAL of Receipts This Page (optional) ▶

800.00

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: PAGE 24 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Cephalon, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial)
PETER E GREBOW

Mailing Address 704 BUCKLEY RD

City PENLLYN State PA Zip Code 19422-1144

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

Name of Employer Cephalon, Inc. Occupation Exec Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt [M M] / [D D] / [Y Y Y Y Y Y]

Transaction ID: PR1231560112673

Amount of Each Receipt this Period 200.00

P/R Deduction (\$100.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
FRITZ I BITTENBENDER

Mailing Address 630 RICHARDS ROAD

City WAYNE State PA Zip Code 19087

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

Name of Employer Cephalon, Inc. Occupation Sr Director Corporate Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt [M M] / [D D] / [Y Y Y Y Y Y]

Transaction ID: PR1259688912673

Amount of Each Receipt this Period 1200.00

P/R Deduction (\$100.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
ROBERT EMERSON

Mailing Address 4046 HOLLOW ROAD

City MALVERN State PA Zip Code 19355

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

Name of Employer Cephalon, Inc. Occupation Sr Director Financial Analysis & Busin

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]

Transaction ID: PR1309510612673

Amount of Each Receipt this Period 120.00

P/R Deduction (\$10.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► 1520.00

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 25 / 35
	<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)
Cephalon, Inc. Employees' Political Action Committee

A.	Full Name (Last, First, Middle Initial) DAVID J CLARK	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1092 OLD MILL POND ROAD	Transaction ID: PR1309510712673
	City MELBOURNE State FL Zip Code 32940-6885	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Semi-Monthly)
	Name of Employer Cephalon, Inc. Occupation CNS Specialist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) MICHAEL A ORLOWSKI	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 14 CRAIG LANE	Transaction ID: PR1309510812673
	City MALVERN State PA Zip Code 19355	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Semi-Monthly)
	Name of Employer Cephalon, Inc. Occupation Sr Director Supply Chain Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) STEVEN H GERSON	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 2508 POND VIEW DR	Transaction ID: PR1309510912673
	City WEST CHESTER State PA Zip Code 19382	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Semi-Monthly)
	Name of Employer Cephalon, Inc. Occupation Sr Analytical Chemist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional)	840.00
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: PAGE 26 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Cephalon, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial)
KARAL THORSFELDT
Mailing Address 1285 VIETTI STREET
City HENDERSON, State NV Zip Code 89012
FEC ID number of contributing federal political committee. **C**
Name of Employer Cephalon, Inc. Occupation National Account Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt [M M] / [D D] / [Y Y Y Y Y]
Transaction ID: PR1309511012673
Amount of Each Receipt this Period 120.00
P/R Deduction (\$10.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
JAMES A STERCHELE
Mailing Address 1084 SPENCER DR.
City DOWNINGTOWN, State PA Zip Code 19335-4056
FEC ID number of contributing federal political committee. **C**
Name of Employer Cephalon, Inc. Occupation Assoc. Director, Medical Services
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt [M M] / [D D] / [Y Y Y Y Y]
Transaction ID: PR1309511112673
Amount of Each Receipt this Period 120.00
P/R Deduction (\$10.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
STEPHEN G CANNATA
Mailing Address 125 CROSSPOINTE DR.
City WEST CHESTER, State PA Zip Code 19380-4165
FEC ID number of contributing federal political committee. **C**
Name of Employer Cephalon, Inc. Occupation Product Director
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt [M M] / [D D] / [Y Y Y Y Y]
Transaction ID: PR1323381412673
Amount of Each Receipt this Period 300.00
P/R Deduction (\$25.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► 540.00
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 27 / 35
	<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)
Cephalon, Inc. Employees' Political Action Committee

A.	Full Name (Last, First, Middle Initial) BRYAN M REASONS		Date of Receipt
	Mailing Address 6 KAOLIN PLACE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	CHADDS FORD,	PA	19317
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1323381512673
Name of Employer Cephalon, Inc.		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 120.00
			P/R Deduction (\$10.00 Semi-Monthly)

B.	Full Name (Last, First, Middle Initial) MICHAEL P HEMENWAY		Date of Receipt
	Mailing Address 333 WEST NORTH AVE #407		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	CHICAGO,	IL	60610
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1333453912673
Name of Employer Cephalon, Inc.		Occupation Area Sales Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 120.00
			P/R Deduction (\$10.00 Semi-Monthly)

C.	Full Name (Last, First, Middle Initial) DAVID V. GOUDELOCK		Date of Receipt
	Mailing Address 150 GROCE ROAD		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	SPARTANBURG,	SC	29302
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1333454012673
Name of Employer Cephalon, Inc.		Occupation Area Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 120.00
			P/R Deduction (\$10.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 360.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 35
(check only one)

<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)
Cephalon, Inc. Employees' Political Action Committee

A.

Full Name (Last, First, Middle Initial)
DEBORAH W BEARER

Mailing Address 1610 WHITE OAK CT

City State Zip Code
PITTSBURGH PA 15237-6700

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

Name of Employer Occupation
Cephalon, Inc. Associate Director, Healthcare Systems

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt [M M] / [D D] / [Y Y Y Y Y]

Transaction ID: PR1333454112673

Amount of Each Receipt this Period 300.00

P/R Deduction (\$25.00 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)
RAE L THOMAS

Mailing Address 1310 MARTHA CUSTIS DRIVE

City State Zip Code
ALEXANDRIA VA 22314

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

Name of Employer Occupation
Cephalon, Inc. Territory Sales Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt [M M] / [D D] / [Y Y Y Y Y]

Transaction ID: PR1333454212673

Amount of Each Receipt this Period 120.00

P/R Deduction (\$10.00 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)
ROBERT D RICHARDSON

Mailing Address 261 PARK AVE

City State Zip Code
HARLEYSVILLE PA 19438

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

Name of Employer Occupation
Cephalon, Inc. Assoc Director Internal Audit

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt [M M] / [D D] / [Y Y Y Y Y]

Transaction ID: PR1333454312673

Amount of Each Receipt this Period 120.00

P/R Deduction (\$10.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► **540.00**

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 29 / 35
	<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)
Cephalon, Inc. Employees' Political Action Committee

A.	Full Name (Last, First, Middle Initial) JEFFREY M BONNEM	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 31 DEVEREUX ROAD	Transaction ID: PR1333454412673
	City State Zip Code GLENMOORE PA 19343-1616	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Semi-Monthly)
	Name of Employer Occupation Cephalon, Inc. Sr Director Technical Operations Finan	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

B.	Full Name (Last, First, Middle Initial) JEFFREY H DAVIS	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 14657 NOVA SCOTIA DR	Transaction ID: PR1333454512673
	City State Zip Code FONTANA CA 92336-0637	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$10.00 Semi-Monthly)
	Name of Employer Occupation Cephalon, Inc. CNS Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) JENNIFER M CONNELLY	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 308 DAWNWOOD DR	Transaction ID: PR1345005312673
	City State Zip Code EDGEWATER MD 21037-3442	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$50.00 Semi-Monthly)
	Name of Employer Occupation Cephalon, Inc. Director, Policy Development & Reimbur	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional)	840.00
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: PAGE 30 / 35
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Cephalon, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial)
KIMBERLY ZIMMERMAN

Mailing Address 225 C ST NE
CONDO A

City WASHINGTON State DC Zip Code 20002-5700

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

Name of Employer Cephalon, Inc. Occupation Director, Government Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt / /

Transaction ID: PR1367771112673

Amount of Each Receipt this Period 600.00

P/R Deduction (\$50.00 Semi-Monthly)

B. Full Name (Last, First, Middle Initial)
CHRISTINA D'ANGELO

Mailing Address 27 LAKESIDE AVE

City RUMSON State NJ Zip Code 07760-1546

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

Name of Employer Cephalon, Inc. Occupation CNS Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt / /

Transaction ID: PR1386699712673

Amount of Each Receipt this Period 120.00

P/R Deduction (\$10.00 Semi-Monthly)

C. Full Name (Last, First, Middle Initial)
LESLEY RUSSELL COOPER

Mailing Address 200 PEMBROOKE CIRCLE

City PHOENIXVILLE State PA Zip Code 19460-5724

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

Name of Employer Cephalon, Inc. Occupation Exec Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt / /

Transaction ID: PR1411031012673

Amount of Each Receipt this Period 200.00

P/R Deduction (\$100.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional) ► **920.00**

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 31 / 35
	<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)
Cephalon, Inc. Employees' Political Action Committee

A.	Full Name (Last, First, Middle Initial) MARY ROBIN DEROGATIS	Date of Receipt
	Mailing Address 108 PENNINGTON RD	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City PAOLI, State PA Zip Code 19301	Transaction ID: PR1414688312673
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 600.00
	Name of Employer: Cephalon, Inc. Occupation: Vice President, Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00	P/R Deduction (\$50.00 Semi-Monthly)

B.	Full Name (Last, First, Middle Initial) JEFFREY M DAYNO	Date of Receipt
	Mailing Address 1501 FOXBURY ROAD	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City MAPLE GLEN, State PA Zip Code 19002	Transaction ID: PR1414688412673
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 600.00
	Name of Employer: Cephalon, Inc. Occupation: Sr. Director, Medical Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 950.00	P/R Deduction (\$50.00 Semi-Monthly)

C.	Full Name (Last, First, Middle Initial) ELIZABETH A BARRETT	Date of Receipt
	Mailing Address 3 WOODSIDE LANE	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City NEW HOPE, State PA Zip Code 18938	Transaction ID: PR1428434012673
	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 600.00
	Name of Employer: Cephalon, Inc. Occupation: Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 850.00	P/R Deduction (\$50.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)	1800.00
TOTAL This Period (last page this line number only)	20700.00

**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 32 / 35

<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

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)
Cephalon, Inc. Employees' Political Action Committee

A. Full Name (Last, First, Middle Initial) Upton For All Of Us Mailing Address P.O. Box 490 City St. Joseph State MI Zip Code 49085 Purpose of Disbursement Candidate Name Rep. Fred Upton Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 06 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 20731468 Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2007
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

B. Full Name (Last, First, Middle Initial) Hulshof For Congress Mailing Address PO Box 1621 City Columbia State MO Zip Code 65205 Purpose of Disbursement Candidate Name Rep. Kenny Hulshof Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 09 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21004954 Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2007
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

C. Full Name (Last, First, Middle Initial) Friends Of John Tanner Mailing Address Post Office Box 1994 City Union City State TN Zip Code 38281 Purpose of Disbursement Candidate Name Rep. John Tanner Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21744932 Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2007
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
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)

<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)
Cephalon, Inc. Employees' Political Action Committee

A.	Full Name (Last, First, Middle Initial) Sestak For Congress	Transaction ID: 21744933 Date of Disbursement 09 / 27 / 2007
	Mailing Address P.O. Box 16	Amount of Each Disbursement this Period 1000.00
	City Media State PA Zip Code 19063	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Rep. Joe Sestak	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Citizens for Arlen Specter	Transaction ID: 22104218 Date of Disbursement 11 / 02 / 2007
	Mailing Address 426 C Street NE Carriage House	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Arlen Specter	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jim Gerlach for Congress Committee	Transaction ID: 22104256 Date of Disbursement 11 / 02 / 2007
	Mailing Address 911 Welsh Ayres Way	Amount of Each Disbursement this Period 1000.00
	City Downingtown State PA Zip Code 19335	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name James Gerlach	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7000.00
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)

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<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)
Cephalon, Inc. Employees' Political Action Committee

A.	Full Name (Last, First, Middle Initial) AmeriPAC: The Fund for a Greater America		Transaction ID: 23091593	
	Mailing Address 499 South Capitol, SW Suite 414		Date of Disbursement MM / DD / YYYY 12 / 06 / 2007	
	City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement		011 Category/ Type	
	Candidate Name Rep. Steny Hoyer			
	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: MD	District: 05		

SUBTOTAL of Disbursements This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	12500.00

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)

<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)
Cephalon, Inc. Employees' Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Friends of Rob Wonderling for State Senate</p> <p>Mailing Address 575 Paterno Drive</p> <p>City Harleysville State PA Zip Code 19438</p> <p>Purpose of Disbursement Robert Wonderling, STATE SENATE 24th PA</p> <p>Candidate Name Robert Wonderling</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 24</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21744931 Date of Disbursement: 09 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p> <p>Robert Wonderling, STATE SENATE 24th PA</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Joseph Scarnati</p> <p>Mailing Address P.O. Box 177</p> <p>City Brockway State PA Zip Code 15824</p> <p>Purpose of Disbursement Joseph Scarnati, STATE SENATE 25th PA</p> <p>Candidate Name PA Sen. Joseph Scarnati, III</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 25</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21744930 Date of Disbursement: 09 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Joseph Scarnati, STATE SENATE 25th PA</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Josh Shapiro</p> <p>Mailing Address P.O. Box 162</p> <p>City Abington State PA Zip Code 19001</p> <p>Purpose of Disbursement Josh Shapiro, STATE HOUSE 153rd PA</p> <p>Candidate Name PA Rep. Josh Shapiro</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 53</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21744935 Date of Disbursement: 09 / 27 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Josh Shapiro, STATE HOUSE 153rd PA</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

2500.00