

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) sanofi-aventis U.S. Inc. Employees PAC

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

ADDRESS (number and street) 801 Pennsylvania Avenue-Suite 725 Washington DC 20004

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00144345 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 09 01 2008 through 09 30 2008

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 Timothy Clark

Signature of Treasurer Electronically Filed by Timothy Clark Date 10 16 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.

Table with 7 columns and 1 row for Office Use Only

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
sanofi-aventis U.S. Inc. Employees PAC

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		61722.79
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	81206.08									
(c) Total Receipts (from Line 19) .....	5120.28	45993.57								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	86326.36	107716.36								
7. Total Disbursements (from Line 31) .....	8855.00	30245.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	77471.36	77471.36								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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  
sanofi-aventis U.S. Inc. Employees PAC

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	3524.70	24573.51
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1595.58	21420.06
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	5120.28	45993.57
(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) .....	5120.28	45993.57
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)) .....	5120.28	45993.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5120.28	45993.57

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	5.00	195.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	5.00	195.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	3500.00	18000.00
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.....	5350.00	12050.00
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))..	8855.00	30245.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8855.00	30245.00

**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 .....	5120.28	45993.57
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5120.28	45993.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5.00	195.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5.00	195.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 38  
(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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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)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
Ambaw Bellete

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2008

**Transaction ID:** A2008-1758786

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Ambaw Bellete

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2008

**Transaction ID:** A2008-1883434

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
Deanne C Calvert

Mailing Address 1631 16TH AVE. #412

City State Zip Code  
SEATTLE WA 98122

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

Name of Employer sanofi-aventis U.S. Inc. Occupation LEGAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2008

**Transaction ID:** A2008-1758603

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **75.00**

**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 7 / 38
	<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)  
sanofi-aventis U.S. Inc. Employees PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Deanne C Calvert		Date of Receipt MM / DD / YYYY 09 / 30 / 2008		
	Mailing Address 1631 16TH AVE. #412		Transaction ID: A2008-1883252		
	City SEATTLE	State WA	Zip Code 98122	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer sanofi-aventis U.S. Inc.	Occupation LEGAL	Aggregate Year-to-Date 275.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Capaldi		Date of Receipt MM / DD / YYYY 09 / 15 / 2008		
	Mailing Address 300 Somerset Corp Blvc		Transaction ID: A2008-1758789		
	City Bridgewater	State NJ	Zip Code 08807	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer sanofi-aventis U.S. Inc.	Occupation Executive	Aggregate Year-to-Date 250.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Capaldi		Date of Receipt MM / DD / YYYY 09 / 30 / 2008		
	Mailing Address 300 Somerset Corp Blvc		Transaction ID: A2008-1883437		
	City Bridgewater	State NJ	Zip Code 08807	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer sanofi-aventis U.S. Inc.	Occupation Executive	Aggregate Year-to-Date 275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	75.00
<b>TOTAL</b> 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 8 / 38
	<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)  
sanofi-aventis U.S. Inc. Employees PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Stacy Chick		Date of Receipt
	Mailing Address 300 SOMERSET CORPORATE BLVD.		<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 09 / 15 / 2008
	City	State	Zip Code
	BRIDGEWATER	NJ	08807
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-1758626
Name of Employer sanofi-aventis U.S. Inc.		Occupation 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 ▼	<input type="text"/> 15.00
		<input type="text"/> 255.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Stacy Chick		Date of Receipt
	Mailing Address 300 SOMERSET CORPORATE BLVD.		<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 09 / 30 / 2008
	City	State	Zip Code
	BRIDGEWATER	NJ	08807
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-1883275
Name of Employer sanofi-aventis U.S. Inc.		Occupation 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 ▼	<input type="text"/> 15.00
		<input type="text"/> 270.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Elizabeth Cirri		Date of Receipt
	Mailing Address 300 SOMERSET CORPORATE BLVD.		<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 09 / 15 / 2008
	City	State	Zip Code
	BRIDGEWATER	NJ	08807
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2008-1758771
Name of Employer sanofi-aventis U.S. Inc.		Occupation EXECUTIVE	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 ▼	<input type="text"/> 27.29
		<input type="text"/> 463.93	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 57.29
<b>TOTAL</b> 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 9 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
sanofi-aventis U.S. Inc. Employees PAC

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth Cirri

Mailing Address 300 SOMERSET CORPORATE BLVD.

City BRIDGEWATER State NJ Zip Code 08807

FEC ID number of contributing federal political committee. C

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 491.22

Date of Receipt 09 / 30 / 2008  
**Transaction ID:** A2008-1883419

Amount of Each Receipt this Period 27.29

**B.** Full Name (Last, First, Middle Initial)  
Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City BRIDGEWATER State NJ Zip Code 08807

FEC ID number of contributing federal political committee. C

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 717.06

Date of Receipt 09 / 15 / 2008  
**Transaction ID:** A2008-1758770

Amount of Each Receipt this Period 42.18

**C.** Full Name (Last, First, Middle Initial)  
Timothy Clark

Mailing Address 300 SOMERSET CORPORATE BLVD.

City BRIDGEWATER State NJ Zip Code 08807

FEC ID number of contributing federal political committee. C

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 759.24

Date of Receipt 09 / 30 / 2008  
**Transaction ID:** A2008-1883418

Amount of Each Receipt this Period 42.18

**SUBTOTAL** of Receipts This Page (optional) ..... 111.65

**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 10 / 38  
(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)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City BRIDGEWATER State NJ Zip Code 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 722.50

Date of Receipt: 09 / 15 / 2008  
**Transaction ID: A2008-1758781**  
 Amount of Each Receipt this Period: 42.50

**B.**

Full Name (Last, First, Middle Initial)  
Mark Coin

Mailing Address 300 SOMERSET CORPORATE BLVD.

City BRIDGEWATER State NJ Zip Code 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 765.00

Date of Receipt: 09 / 30 / 2008  
**Transaction ID: A2008-1883429**  
 Amount of Each Receipt this Period: 42.50

**C.**

Full Name (Last, First, Middle Initial)  
Robert DeLuca

Mailing Address 300 SOMERSET CORPORATE BLVD.

City BRIDGEWATER State NJ Zip Code 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt: 09 / 15 / 2008  
**Transaction ID: A2008-1758787**  
 Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 135.00

**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 11 / 38  
(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)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
Robert DeLuca

Mailing Address 300 SOMERSET CORPORATE BLVD.

City BRIDGEWATER State NJ Zip Code 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** A2008-1883435

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Joseph Devaney

Mailing Address 4 WARREN LN

City EDGEWATER PARK State NJ Zip Code 08010

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

Name of Employer sanofi-aventis U.S. Inc. Occupation US PUBLIC POLICY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1714.45

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2008

**Transaction ID:** A2008-1758585

Amount of Each Receipt this Period  
105.32

**C.**

Full Name (Last, First, Middle Initial)  
Joseph Devaney

Mailing Address 4 WARREN LN

City EDGEWATER PARK State NJ Zip Code 08010

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

Name of Employer sanofi-aventis U.S. Inc. Occupation US PUBLIC POLICY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1819.77

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** A2008-1883234

Amount of Each Receipt this Period  
105.32

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **260.64**

**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 12 / 38

(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)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
BRIDGEWATER NJ 08807

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 907.97

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 15 / 2008

Transaction ID: A2008-1758774

Amount of Each Receipt this Period

53.41

**B.**

Full Name (Last, First, Middle Initial)  
Glenn Dooley

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
BRIDGEWATER NJ 08807

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 961.38

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 30 / 2008

Transaction ID: A2008-1883422

Amount of Each Receipt this Period

53.41

**C.**

Full Name (Last, First, Middle Initial)  
John Eppard

Mailing Address 300 Somerset Corporate Blvd.

City State Zip Code  
BRIDGEWATER NJ 08807

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 15 / 2008

Transaction ID: A2008-1758742

Amount of Each Receipt this Period

15.00

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

121.82

**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 13 / 38
	<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)  
sanofi-aventis U.S. Inc. Employees PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) John Eppard		Date of Receipt
	Mailing Address 300 Somerset Corporate Blvd.		<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 09 / 30 / 2008
	City	State	Zip Code
	BRIDGEWATER	NJ	08807
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: A2008-1883390</b>
Name of Employer sanofi-aventis U.S. Inc.		Occupation Executive	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 ▼ 270.00	15.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Eddie D Evans		Date of Receipt
	Mailing Address 7931 HOLLINGTON PL		<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 09 / 15 / 2008
	City	State	Zip Code
	FAIRFAX STATION	VA	22039
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: A2008-1758670</b>
Name of Employer sanofi-aventis U.S. Inc.		Occupation OFFICER	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 ▼ 425.00	25.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Eddie D Evans		Date of Receipt
	Mailing Address 7931 HOLLINGTON PL		<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 09 / 30 / 2008
	City	State	Zip Code
	FAIRFAX STATION	VA	22039
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: A2008-1883319</b>
Name of Employer sanofi-aventis U.S. Inc.		Occupation OFFICER	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 ▼ 450.00	25.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>65.00</b>
<b>TOTAL</b> 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 / 38

(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)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City State Zip Code  
KNOXVILLE TN 37922

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. MANAGER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 5 / 2 0 0 8

Transaction ID: A2008-1758767

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)  
Walter L Gose

Mailing Address 12148 SOUTHWICK CR

City State Zip Code  
KNOXVILLE TN 37922

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. MANAGER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 8

Transaction ID: A2008-1883415

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)  
Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City State Zip Code  
McLean VA 22102

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. VP of Government Relations

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3541.61

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 5 / 2 0 0 8

Transaction ID: A2008-1758780

Amount of Each Receipt this Period

208.33

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

258.33

**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 15 / 38  
(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)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
Edward F Greissing, Jr.

Mailing Address 1200 Hunters Grove Court

City State Zip Code  
McLean VA 22102

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

Name of Employer sanofi-aventis U.S. Inc. Occupation VP of Government Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3749.94

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** A2008-1883428

Amount of Each Receipt this Period  
208.33

**B.**

Full Name (Last, First, Middle Initial)  
Ms. Debbie Hayes

Mailing Address 1406 MURDOCK RD

City State Zip Code  
MARIETTA GA 30062

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

Name of Employer sanofi-aventis U.S. Inc. Occupation MGR GOV'T RELATIONS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2008

**Transaction ID:** A2008-1758762

Amount of Each Receipt this Period  
15.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Debbie Hayes

Mailing Address 1406 MURDOCK RD

City State Zip Code  
MARIETTA GA 30062

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

Name of Employer sanofi-aventis U.S. Inc. Occupation MGR GOV'T RELATIONS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2008

**Transaction ID:** A2008-1883410

Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **238.33**

**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 / 38  
(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)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City BRIDGEWATER State NJ Zip Code 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt: 09 / 15 / 2008  
**Transaction ID: A2008-1758731**  
 Amount of Each Receipt this Period: 25.00

**B.**

Full Name (Last, First, Middle Initial)  
Richard Hodge

Mailing Address 300 Somerset Corporate Blvd.

City BRIDGEWATER State NJ Zip Code 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 09 / 30 / 2008  
**Transaction ID: A2008-1883379**  
 Amount of Each Receipt this Period: 25.00

**C.**

Full Name (Last, First, Middle Initial)  
Ann E Isom

Mailing Address 16 WILLIAM WAY

City LONG VALLEY State NJ Zip Code 07853

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

Name of Employer sanofi-aventis U.S. Inc. Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt: 09 / 15 / 2008  
**Transaction ID: A2008-1758611**  
 Amount of Each Receipt this Period: 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 75.00

**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 / 38
	<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)  
sanofi-aventis U.S. Inc. Employees PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Ann E Isom	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 16 WILLIAM WAY	<b>Transaction ID:</b> A2008-1883260
	City State Zip Code LONG VALLEY NJ 07853	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer sanofi-aventis U.S. Inc. Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jay Jennings	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address 6240 Woodard Bay Road NE	<b>Transaction ID:</b> A2008-1758769
	City State Zip Code Olympia WA 98506	Amount of Each Receipt this Period 54.54
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 927.18	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jay Jennings	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 6240 Woodard Bay Road NE	<b>Transaction ID:</b> A2008-1883417
	City State Zip Code Olympia WA 98506	Amount of Each Receipt this Period 54.54
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 981.72	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>134.08</b>
<b>TOTAL</b> 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 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
sanofi-aventis U.S. Inc. Employees PAC

**A.** Full Name (Last, First, Middle Initial)  
David Johnson  
Mailing Address P.O. BOX 6474

City State Zip Code  
**SANTA BARBARA** CA 93160

FEC ID number of contributing federal political committee. C

Name of Employer sanofi-aventis U.S. Inc. Occupation FIELD SALES

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 255.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 15 / 2008  
**Transaction ID: A2008-1758601**  
Amount of Each Receipt this Period 15.00

**B.** Full Name (Last, First, Middle Initial)  
David Johnson  
Mailing Address P.O. BOX 6474

City State Zip Code  
**SANTA BARBARA** CA 93160

FEC ID number of contributing federal political committee. C

Name of Employer sanofi-aventis U.S. Inc. Occupation FIELD SALES

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 270.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 30 / 2008  
**Transaction ID: A2008-1883250**  
Amount of Each Receipt this Period 15.00

**C.** Full Name (Last, First, Middle Initial)  
I. Benjamin Johnson, II  
Mailing Address 11551 ALLWOOD DR

City State Zip Code  
**RIVERSIDE** CA 92503

FEC ID number of contributing federal political committee. C

Name of Employer sanofi-aventis U.S. Inc. Occupation FIELD SALES

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 425.00

Date of Receipt M M / D D / Y Y Y Y  
09 / 15 / 2008  
**Transaction ID: A2008-1758689**  
Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... 55.00

**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 19 / 38

(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)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
I. Benjamin Johnson, II

Mailing Address 11551 ALLWOOD DR

City State Zip Code  
RIVERSIDE CA 92503

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. FIELD SALES

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 30 / 2008

Transaction ID: A2008-1883337

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)  
Ronald Jones

Mailing Address 300 Somerset Corporate Blvd.

City State Zip Code  
BRIDGEWATER NJ 08807

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 258.57

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 15 / 2008

Transaction ID: A2008-1758617

Amount of Each Receipt this Period

15.21

**C.**

Full Name (Last, First, Middle Initial)  
Ronald Jones

Mailing Address 300 Somerset Corporate Blvd.

City State Zip Code  
BRIDGEWATER NJ 08807

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 273.78

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 30 / 2008

Transaction ID: A2008-1883266

Amount of Each Receipt this Period

15.21

**SUBTOTAL** of Receipts This Page (optional) .....

55.42

**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 / 38  
(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)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
Alexandria Lebeaut

Mailing Address 300 Somerset Corporate Blvd.

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2008

Transaction ID: A2008-1758782

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Alexandria Lebeaut

Mailing Address 300 Somerset Corporate Blvd.

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2008

Transaction ID: A2008-1883430

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
D. Kirk Morgan

Mailing Address 58 ALPINE DR

City State Zip Code  
LATHAM NY 12110

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

Name of Employer sanofi-aventis U.S. Inc. Occupation MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
357.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2008

Transaction ID: A2008-1758711

Amount of Each Receipt this Period  
21.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **71.00**

**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 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
sanofi-aventis U.S. Inc. Employees PAC

**A.** Full Name (Last, First, Middle Initial)  
D. Kirk Morgan

Mailing Address 58 ALPINE DR

City State Zip Code  
LATHAM NY 12110

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

Name of Employer sanofi-aventis U.S. Inc. Occupation MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 378.00

Date of Receipt: MM / DD / YYYY  
09 / 30 / 2008

**Transaction ID:** A2008-1883359

Amount of Each Receipt this Period: 21.00

**B.** Full Name (Last, First, Middle Initial)  
Hugh O'Neill

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
BRIDGEWATER NJ 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1977.95

Date of Receipt: MM / DD / YYYY  
09 / 15 / 2008

**Transaction ID:** A2008-1758775

Amount of Each Receipt this Period: 116.35

**C.** Full Name (Last, First, Middle Initial)  
Hugh O'Neill

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
BRIDGEWATER NJ 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2094.30

Date of Receipt: MM / DD / YYYY  
09 / 30 / 2008

**Transaction ID:** A2008-1883423

Amount of Each Receipt this Period: 116.35

**SUBTOTAL** of Receipts This Page (optional) ..... ► 253.70

**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 22 / 38
	<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)  
sanofi-aventis U.S. Inc. Employees PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Anne Oller	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address 300 SOMERSET CORPORATE BLVD.	<b>Transaction ID:</b> A2008-1758777
	City State Zip Code BRIDGEWATER NJ 08807	Amount of Each Receipt this Period 18.17
	FEC ID number of contributing federal political committee. C	
	Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 308.89	

<b>B.</b>	Full Name (Last, First, Middle Initial) Anne Oller	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 300 SOMERSET CORPORATE BLVD.	<b>Transaction ID:</b> A2008-1883425
	City State Zip Code BRIDGEWATER NJ 08807	Amount of Each Receipt this Period 18.17
	FEC ID number of contributing federal political committee. C	
	Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 327.06	

<b>C.</b>	Full Name (Last, First, Middle Initial) Karen Preble	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address 300 SOMERSET CORPORATE BLVD.	<b>Transaction ID:</b> A2008-1758778
	City State Zip Code BRIDGEWATER NJ 08807	Amount of Each Receipt this Period 56.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 956.25	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	92.59
<b>TOTAL</b> 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 23 / 38
	<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)  
sanofi-aventis U.S. Inc. Employees PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Karen Preble	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 300 SOMERSET CORPORATE BLVD.	<b>Transaction ID:</b> A2008-1883426
	City State Zip Code BRIDGEWATER NJ 08807	Amount of Each Receipt this Period 56.25
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer sanofi-aventis U.S. Inc.	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1012.50	

<b>B.</b>	Full Name (Last, First, Middle Initial) D. Mark Richardson	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address 2200 MORNINGSIDE DR	<b>Transaction ID:</b> A2008-1758764
	City State Zip Code JONESBORO AR 72404	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer sanofi-aventis U.S. Inc.	Occupation FIELD SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) D. Mark Richardson	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 2200 MORNINGSIDE DR	<b>Transaction ID:</b> A2008-1883412
	City State Zip Code JONESBORO AR 72404	Amount of Each Receipt this Period 15.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer sanofi-aventis U.S. Inc.	Occupation FIELD SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	86.25
<b>TOTAL</b> 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 / 38  
(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)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City State Zip Code  
TACOMA WA 98407

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

Name of Employer sanofi-aventis U.S. Inc. Occupation PROF. SALES REP.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2008

Transaction ID: A2008-1758606

Amount of Each Receipt this Period  
20.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Kevin Ryan

Mailing Address 4646 N LEXINGTON

City State Zip Code  
TACOMA WA 98407

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

Name of Employer sanofi-aventis U.S. Inc. Occupation PROF. SALES REP.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 30 / 2008

Transaction ID: A2008-1883255

Amount of Each Receipt this Period  
20.00

**C.**

Full Name (Last, First, Middle Initial)  
Mark R Shaw

Mailing Address 3 SHIPLEY COURT

City State Zip Code  
PITTSBURY NJ 08867

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

Name of Employer sanofi-aventis U.S. Inc. Occupation ADMIN SERVICES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 939.25

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2008

Transaction ID: A2008-1758610

Amount of Each Receipt this Period  
55.25

**SUBTOTAL** of Receipts This Page (optional) ..... ► 95.25

**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 / 38
	<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)  
sanofi-aventis U.S. Inc. Employees PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mark R Shaw	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 3 SHIPLEY COURT	<b>Transaction ID:</b> A2008-1883259
	City State Zip Code PITTSTOWN NJ 08867	Amount of Each Receipt this Period 55.25
	FEC ID number of contributing federal political committee. C	
	Name of Employer sanofi-aventis U.S. Inc. Occupation ADMIN SERVICES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 994.50	

<b>B.</b>	Full Name (Last, First, Middle Initial) Jonathan Spear	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address 300 SOMERSET CORPORATE BLVD.	<b>Transaction ID:</b> A2008-1758779
	City State Zip Code BRIDGEWATER NJ 08807	Amount of Each Receipt this Period 208.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3541.61	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jonathan Spear	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 300 SOMERSET CORPORATE BLVD.	<b>Transaction ID:</b> A2008-1883427
	City State Zip Code BRIDGEWATER NJ 08807	Amount of Each Receipt this Period 208.33
	FEC ID number of contributing federal political committee. C	
	Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3749.94	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	471.91
<b>TOTAL</b> 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 / 38  
(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)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
Chirico S Sultan

Mailing Address 300 Somerset Corp Blvd

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
426.60

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2008

**Transaction ID:** A2008-1758788

Amount of Each Receipt this Period  
42.66

**B.**

Full Name (Last, First, Middle Initial)  
Chirico S Sultan

Mailing Address 300 Somerset Corp Blvd

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
469.26

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2008

**Transaction ID:** A2008-1883436

Amount of Each Receipt this Period  
42.66

**C.**

Full Name (Last, First, Middle Initial)  
Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City State Zip Code  
BRIDGEWATER NJ 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2008

**Transaction ID:** A2008-1758620

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **110.32**

**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 27 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
sanofi-aventis U.S. Inc. Employees PAC

**A.** Full Name (Last, First, Middle Initial)  
Ann Taylor

Mailing Address 300 Somerset Corporate Blvd.

City BRIDGEWATER State NJ Zip Code 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 09 / 30 / 2008  
**Transaction ID:** A2008-1883269  
 Amount of Each Receipt this Period: 25.00

**B.** Full Name (Last, First, Middle Initial)  
John Valenti

Mailing Address 300 SOMERSET CORPORATE BLVD.

City BRIDGEWATER State NJ Zip Code 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 796.79

Date of Receipt: 09 / 15 / 2008  
**Transaction ID:** A2008-1758776  
 Amount of Each Receipt this Period: 46.87

**C.** Full Name (Last, First, Middle Initial)  
John Valenti

Mailing Address 300 SOMERSET CORPORATE BLVD.

City BRIDGEWATER State NJ Zip Code 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 843.66

Date of Receipt: 09 / 30 / 2008  
**Transaction ID:** A2008-1883424  
 Amount of Each Receipt this Period: 46.87

**SUBTOTAL** of Receipts This Page (optional) ..... ► 118.74

**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 28 / 38

(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)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
Rebecca Waldrop

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
BRIDGEWATER NJ 08807

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 707.78

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 15 / 2008

Transaction ID: A2008-1758772

Amount of Each Receipt this Period

42.10

**B.**

Full Name (Last, First, Middle Initial)  
Rebecca Waldrop

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
BRIDGEWATER NJ 08807

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 749.88

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 30 / 2008

Transaction ID: A2008-1883420

Amount of Each Receipt this Period

42.10

**C.**

Full Name (Last, First, Middle Initial)  
Danielle Walters

Mailing Address 300 SOMERSET CORPORATE BLVD.

City State Zip Code  
BRIDGEWATER NJ 08807

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1020.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 15 / 2008

Transaction ID: A2008-1758773

Amount of Each Receipt this Period

60.00

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

144.20

**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 29 / 38  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
sanofi-aventis U.S. Inc. Employees PAC

**A.** Full Name (Last, First, Middle Initial)  
Danielle Walters

Mailing Address 300 SOMERSET CORPORATE BLVD.

City BRIDGEWATER State NJ Zip Code 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1080.00

Date of Receipt 09 / 30 / 2008  
Transaction ID: A2008-1883421  
Amount of Each Receipt this Period 60.00

**B.** Full Name (Last, First, Middle Initial)  
Victoria Wicks

Mailing Address 300 SOMERSET CORPORATE BLVD.

City BRIDGEWATER State NJ Zip Code 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1383.46

Date of Receipt 09 / 15 / 2008  
Transaction ID: A2008-1758768  
Amount of Each Receipt this Period 81.38

**C.** Full Name (Last, First, Middle Initial)  
Victoria Wicks

Mailing Address 300 SOMERSET CORPORATE BLVD.

City BRIDGEWATER State NJ Zip Code 08807

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

Name of Employer sanofi-aventis U.S. Inc. Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1464.84

Date of Receipt 09 / 30 / 2008  
Transaction ID: A2008-1883416  
Amount of Each Receipt this Period 81.38

**SUBTOTAL** of Receipts This Page (optional) ..... ► 222.76

**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 / 38

(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)  
sanofi-aventis U.S. Inc. Employees PAC

**A.**

Full Name (Last, First, Middle Initial)  
Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1193.57

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 15 / 2008

Transaction ID: A2008-1758784

Amount of Each Receipt this Period

70.21

**B.**

Full Name (Last, First, Middle Initial)  
Christine Zak

Mailing Address 300 Somerset Corporate Blvd.

City State Zip Code  
Bridgewater NJ 08807

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

Name of Employer Occupation  
sanofi-aventis U.S. Inc. Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1263.78

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 30 / 2008

Transaction ID: A2008-1883432

Amount of Each Receipt this Period

70.21

**SUBTOTAL** of Receipts This Page (optional) .....

140.42

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

3524.70

**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 31 / 38

<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)  
sanofi-aventis U.S. Inc. Employees PAC

A.

Full Name (Last, First, Middle Initial)  
Dave Camp for Congress 2008

Mailing Address P.O. Box 423

City Midland State MI Zip Code 48640

Purpose of Disbursement  
Contribution

Candidate Name  
Dave Camp

Office Sought:  House  
 Senate  
 President  
State: MI District: 04

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: B223314

Date of Disbursement

09 / 12 / 2008

Amount of Each Disbursement this Period

3500.00

SUBTOTAL of Disbursements This Page (optional) .....

3500.00

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

3500.00

# 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)  
sanofi-aventis U.S. Inc. Employees PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Committee to Re-Elect Yvette Alexander</p> <p>Mailing Address 2524 Pennsylvania Avenue SE</p> <p>City Washington State DC Zip Code 20020</p> <p>Purpose of Disbursement G-2008 City Council Ward 7 DC</p> <p>Candidate Name Yvette Alexander</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B235570</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Barry for Ward Eight</p> <p>Mailing Address PO Box 34182</p> <p>City Washington State DC Zip Code 20043</p> <p>Purpose of Disbursement G-2008 City Council Ward 8 DC</p> <p>Candidate Name Marion Berry</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B235571</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Muriel Bowser for Ward 4 2008</p> <p>Mailing Address P.O. Box 60474</p> <p>City Washington State DC Zip Code 20039</p> <p>Purpose of Disbursement G-2008 City Council Ward 4 DC</p> <p>Candidate Name Muriel Bowser</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B235569</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

600.00

**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)

<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)  
sanofi-aventis U.S. Inc. Employees PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Charles Barkley for Delegate Cmte.</p> <p>Mailing Address 19222 Golden Meadow Drive</p> <p>City Germantown State MD Zip Code 20876</p> <p>Purpose of Disbursement O-2010 State House 39 MD</p> <p>Candidate Name Charles Barkley</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p><b>Transaction ID:</b> B235573 <b>Date of Disbursement</b> 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Shirley Nathan-Pulliam</p> <p>Mailing Address PO Box 31785</p> <p>City Baltimore State MD Zip Code 21207</p> <p>Purpose of Disbursement O-2010 State House 10 MD</p> <p>Candidate Name Shirley Nathan-Pulliam</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p><b>Transaction ID:</b> B235575 <b>Date of Disbursement</b> 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 200.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends of Joe Roberts</p> <p>Mailing Address P.O. Box 1362</p> <p>City Bellmawr State NJ Zip Code 08099</p> <p>Purpose of Disbursement P-2009 State House 05 NJ</p> <p>Candidate Name Joe Roberts</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle</p>	<p><b>Transaction ID:</b> B233572 <b>Date of Disbursement</b> 09 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

750.00

**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)

<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)  
sanofi-aventis U.S. Inc. Employees PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Election Fund of Richard Codey</p> <p>Mailing Address 449 Mt. Pleasant Ave. Suite 102</p> <p>City West Orange State NJ Zip Code 07052</p> <p>Purpose of Disbursement P-2011 State Senate 27 NJ</p> <p>Candidate Name Richard J Codey</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B233570 <b>Date of Disbursement</b> 09 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Carlos Uresti</p> <p>Mailing Address P.O. Box 240431</p> <p>City San Antonio State TX Zip Code 78224</p> <p>Purpose of Disbursement P-2010 State Senate 19 TX</p> <p>Candidate Name Carlos Uresti</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B226268 <b>Date of Disbursement</b> 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Cmte to Re-elect Richard DeBolt</p> <p>Mailing Address 1673 S. Market Blvd. PMB 159</p> <p>City Chehalis State WA Zip Code 98532</p> <p>Purpose of Disbursement G-2008 State House 20 WA</p> <p>Candidate Name Richard Debolt</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B234549 <b>Date of Disbursement</b> 09 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 400.00</p> <p>011 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1400.00

**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)

<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)  
sanofi-aventis U.S. Inc. Employees PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Deb Eddy <hr/> Mailing Address 6619 132nd Ave. <hr/> City Kirkland State WA Zip Code 98033 <hr/> Purpose of Disbursement G-2008 State House 48 WA <hr/> Candidate Name Deb Eddy <hr/> Office Sought: <input type="checkbox"/> House <input 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: District:	<b>Transaction ID:</b> B234554 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 300.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Citizens to Re-Elect Mark Ericks <hr/> Mailing Address P.O. Box 1496 <hr/> City Bothell State WA Zip Code 98041 <hr/> Purpose of Disbursement G-2008 State House 01 WA <hr/> Candidate Name Mark Ericks <hr/> Office Sought: <input type="checkbox"/> House <input 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: District:	<b>Transaction ID:</b> B234553 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 300.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Doug Ericksen <hr/> Mailing Address P.O. Box 5191 <hr/> City Bellingham State WA Zip Code 98227 <hr/> Purpose of Disbursement G-2008 State House 42 WA <hr/> Candidate Name Douglas J Ericksen <hr/> Office Sought: <input type="checkbox"/> House <input 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: District:	<b>Transaction ID:</b> B234551 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 300.00
	Category/ Type 011
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	900.00
<b>TOTAL</b> 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 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)  
sanofi-aventis U.S. Inc. Employees PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Friends to Re-elect Mike Hewitt  Mailing Address P.O. Box 461  City Walla Walla State WA Zip Code 98908  Purpose of Disbursement G-2008 State Senate 16 WA Candidate Name Mike Hewitt Office Sought: <input type="checkbox"/> House <input 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: District:	Transaction ID: B234548 Date of Disbursement 09 / 20 / 2008  Amount of Each Disbursement this Period 400.00  011 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Citizens to Re-elect Bill Hinkle  Mailing Address 110 E. 4th Ave  City Ellensburg State WA Zip Code 98926  Purpose of Disbursement G-2008 State House 13 WA Candidate Name Bill Hinkle Office Sought: <input type="checkbox"/> House <input 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: District:	Transaction ID: B234547 Date of Disbursement 09 / 20 / 2008  Amount of Each Disbursement this Period 400.00  011 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) People for Lynn Kessler  Mailing Address 62 Kessler Lane  City Hoquiam State WA Zip Code 98550  Purpose of Disbursement G-2008 State House 24 WA Candidate Name Lynn Kessler Office Sought: <input type="checkbox"/> House <input 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: District:	Transaction ID: B234555 Date of Disbursement 09 / 20 / 2008  Amount of Each Disbursement this Period 300.00  011 Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1100.00

**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)

<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)  
sanofi-aventis U.S. Inc. Employees PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Re-Elect Linda Parlette <hr/> Mailing Address P.O. Box 2151 <hr/> City State Zip Code Wenatchee WA 98807 <hr/> Purpose of Disbursement G-2008 State Senate 12 WA <hr/> Candidate Name Linda E Parlette <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B234550 Date of Disbursement MM / DD / YYYY 09 / 20 / 2008
	Amount of Each Disbursement this Period 300.00
<b>B.</b> Full Name (Last, First, Middle Initial) Citizens for Dave Quall <hr/> Mailing Address P.O. Box 1142 <hr/> City State Zip Code Mount Vernon WA 98273 <hr/> Purpose of Disbursement G-2008 State House 40 WA <hr/> Candidate Name Dave Quall <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B234552 Date of Disbursement MM / DD / YYYY 09 / 20 / 2008
	Amount of Each Disbursement this Period 300.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

600.00

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

5350.00

Image# 28992621074

Form/Schedule: SA11AI

Transaction ID:

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

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