PAGE 1 / 14

Image# 201603209011689054

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X Fo	or Other Than An Au	uthorized Commit	iee		Office Use Only
1. NAME OF T COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typ over the lines.	ing, type	12FE4M5	
Regeneron Pharmaceu	ticals, Inc. PAC				
ADDRESS (number and street)	777 Old Saw Mill River Ro	oad			
Check if different than previously reported. (ACC)	Tarrytown			NY	10591
2. FEC IDENTIFICATION NUI	MBER ▼ C	CITY 🛦		STATE A	ZIP CODE ▲
C C00562264	3.		NEW (N) OR	AM (A)	ENDED
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 Year-End Report (YE July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER)	Report Due On: (c) 12-Day PRE-Election Report for the: (d) 30-Day POST-Election Report for the:	eb 20 (M2) ar 20 (M3) or 20 (M4) Primary (12 Convention tion on General (30 tion on	(12C)	Sep 2	in the State of
5. Covering Period 02	01 / 2016	through	02	29	2016
I certify that I have examined this Type or Print Name of Treasurer	Report and to the best of Robert E. Landry	of my knowledge and	belief it is true	e, correct and	complete.
	E. Landry	[Electronical		ate 03	20 / 2016 2016
Office	Jas, or incomplete informati	ion may subject the pe	Son Signing th	is riepoit to th	FEC FORM 3X
Use Only					Rev. 12/2004

SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		<u> </u>
Regeneron Pharmaceuticals, Inc	c. PAC	
Report Covering the Period: From:	02 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	02 29 2016
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		77551.35
(b) Cash on Hand at Beginning of Reporting Period	. 81744.27	
(c) Total Receipts (from Line 19)	. 4629.34	9266.26
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	. 86373.61	86817.61
7. Total Disbursements (from Line 31)	10836.42	11280.42
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	. 75537.19	75537.19
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 mu	Iticandidate 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees	2040.00			
(i) Itemized (use Schedule A)	3846.00	6538.20		
(ii) Unitemized	346.92	1847.64		
(iii) TOTAL (add				
Lines 11(a)(i) and (ii)▶	4192.92	8385.84		
(b) Political Posts Committee	0.00	0.00		
(b) Political Party Committees(c) Other Political Committees	0.00			
(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)▶	4192.92	8385.84		
. Transfers From Affiliated/Other	0.00	0.00		
Party Committees	0.00	0.00		
. All Loans Received	0.00	0.00		
7.11 254.10 110001750				
. Loan Repayments Received	0.00	0.00		
. Offsets To Operating Expenditures				
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	436.42	880.42		
. Refunds of Contributions Made	· · · · ·	,		
to Federal Candidates and Other				
Political Committees	0.00	0.00		
Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00		
. Transfers from Non-Federal and Levin Funds	0.00	0.00		
(a) Non-Federal Account				
(from Schedule H3)	0.00	0.00		
=				
(b) Levin Funds (from Schedule H5)	0.00	0.00		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	4629.34	9266.26		
. Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	4629.34	9266.26		

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) Allocated Federal/Non-Federal		10.01 1.110 1 0.1100	Galeridai Tear-to-Date		
	ivity (from Schedule H4)				
(i)	Federal Share	0.00	0.00		
(ii)	Non-Federal Share	0.00	0.00		
()	ner Federal Operating	0.00	7 7		
	penditures	436.42	880.42		
	al Operating Expenditures				
	d 21(a)(i), (a)(ii), and (b))▶	436.42	880.42		
	rs to Affiliated/Other Party tees	0.00	0.00		
Contrib	utions to				
and Oth	Candidates/Committees ner Political Committees	10400.00	10400.00		
4. Indeper	dent Expenditures		0.00		
Coordir	hedule E)ated Party Expenditures	0.00	0.00		
(2 U.S.	C. §441a(d)) hedule F)	0.00	0.00		
(436 00	nedule 1)				
6. Loan R	epayments Made	0.00	0.00		
	i	0.00	0.00		
Loans IRefunds	Mades of Contributions To:	0.00	0.00		
(a) Inc	ividuals/Persons Other an Political Committees	0.00	0.00		
	ar i omicai committees				
(b) Po	itical Party Committees	0.00	0.00		
(-)	ner Political Committees		0.00		
(su	ch as PACs)	0.00	0.00		
(d) Tot	al Contribution Refunds				
` '	d Lines 28(a), (b), and (c))▶	0.00	0.00		
9. Other D	isbursements	0.00	0.00		
0 Federal	Election Activity (2 U.S.C. §431(20))				
	ocated Federal Election Activity				
, ,	m Schedule H6)				
(i)	Federal Share	0.00	0.00		
/::\	III aviali Ohara	0.00	0.00		
` '	"Levin" Sharederal Election Activity Paid Entirely	7	9 9		
(5) 10	With Federal Funds	0.00	0.00		
(c) Tot	al Federal Election Activity (add				
Li	nes 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
1 Total D	churcomente (add Lines 21/s) 22				
	sbursements (add Lines 21(c), 22, 25, 26, 27, 28(d), 29 and 30(c))	10936 43	11280.42		
LO, L-1,	,,,,	10836.42	11200.42		
2. Total Fe	ederal Disbursements				
	t Line 21(a)(ii) and Line 30(a)(ii)				
from Li	ne 31)	10836.42	11280.42		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	4192.92	8385.84
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4192.92	8385.84
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	436.42	880.42
7. Offsets to Operating Expenditures (from Line 15, page 3)	436.42	880.42
3. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) (check only one)

_	EMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
	ny information copied from such Reports and Sta for commercial purposes, other than using the r			
\rangle	NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc	c. PAC		
Δ.	Receipt For: Primary General Other (specify) ▼		Zip Code 10591 gulatory Affairs Year-to-Date ▼	Date of Receipt 19 2016 Transaction ID: SA11AI.4572 Amount of Each Receipt this Period 384.60 Memo Item \$192.30 Bi-weekly payroll deduction
3.	Full Name (Last, First, Middle Initial) Scott Carver Mailing Address 777 Old Saw Mill River Road City Tarrytown FEC ID number of contributing federal political committee. Name of Employer Regeneron Pharmaceuticals Inc. Receipt For: Primary General Other (specify) ▼		Zip Code 10591 Scale Mfg. & Sciences Year-to-Date ▼	Date of Receipt 19 2016 Transaction ID: SA11AI.4563 Amount of Each Receipt this Period 192.30 Memo Item \$96.15 Bi-weekly payroll deduction
- .	Full Name (Last, First, Middle Initial) Christopher Daly Mailing Address 777 Old Saw Mill River Road City Tarrytown FEC ID number of contributing federal political committee. Name of Employer Regeneron Pharmaceuticals Inc. Receipt For: Primary Other (specify) Other (specify)		Zip Code 10591 ncology & Angiogenesis Year-to-Date ▼	Date of Receipt M
S	SUBTOTAL of Receipts This Page (optional)		•	769.20
т	OTAL This Period (last page this line number or	nlv)		

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 7 OF Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Stator for commercial purposes, other than using the n	tements may not be sold or used by any pe ame and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc.	. PAC	
Regeneron Pharmaceuticals Inc. Receipt For: Primary General Other (specify)	State Zip Code NY 10591 C Occupation VP - Financial Planning Aggregate Year-to-Date ▼ 384.60	Date of Receipt 02 19 2016 Transaction ID: SA11AI.4568 Amount of Each Receipt this Period 192.30 Memo Item \$96.15 Bi-weekly payroll deduction
Regeneron Pharmaceuticals Inc.	State Zip Code NY 10591 C Occupation VP - QA & Operations Aggregate Year-to-Date ▼ 384.60	Date of Receipt 02 19 2016 Transaction ID: SA11AI.4578 Amount of Each Receipt this Period 192.30 Memo Item Bi-weekly payroll deduction: \$96.15
Regeneron Pharmaceuticals Inc.	State Zip Code NY 10591 C Occupation Sr. VP - General Counsel & Secretary Aggregate Year-to-Date ▼ 769.20	Date of Receipt 02 19 2016 Transaction ID: SA11AI.4565 Amount of Each Receipt this Period 384.60 Memo Item \$192.30 Bi-weekly payroll deduction
SUBTOTAL of Receipts This Page (optional)		769.20
TOTAL This Period (last page this line number on	ıly)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 8 OF 14 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 14 13 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) Scott Mellis Date of Receipt Mailing Address 777 Old Saw Mill River Road 2016 City Zip Code State Transaction ID: SA11AI.4575 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 federal political committee. Memo Item Name of Employer Occupation \$192.30 Bi-weekly payroll deduction VP - Clinical Sciences Trans. Medicine Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 769.20 Other (specify) Full Name (Last, First, Middle Initial) B. Hala Mirza Date of Receipt Mailing Address 777 Old Saw Mill River Road 02 19 2016 City State Zip Code Transaction ID: SA11AI.4560 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 federal political committee. Memo Item Name of Employer Occupation Regeneron Pharmaceuticals Inc. \$192.30 Bi-weekly payroll deduction VP - Corporate Communications Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 769,20 Full Name (Last, First, Middle Initial) c. Andrew Murphy Date of Receipt Mailing Address 777 Old Saw Mill River Road 02 19 2016 City State Zip Code Transaction ID: SA11AI.4580 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing С 384.60 federal political committee. Memo Item Name of Employer Occupation \$192.30 Bi-weekly payroll deduction Regeneron Pharmaceuticals Inc. Sr. VP - Research Regeneron Labs Receipt For: Aggregate Year-to-Date ▼ Primary General 769.20 Other (specify) 1153.80 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 9 OF 14 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) William Olson Date of Receipt Mailing Address 777 Old Saw Mill River Road 2016 City Zip Code State Transaction ID: SA11AI.4564 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 federal political committee. Memo Item Name of Employer Occupation \$192.30 Bi-weekly payroll deduction VP - Research & Development Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 769.20 Other (specify) Full Name (Last, First, Middle Initial) B. Tor Smeland Date of Receipt Mailing Address 777 Old Saw Mill River Road 02 19 2016 City State Zip Code Transaction ID: SA11AI.4571 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 federal political committee. Memo Item Name of Employer Occupation Regeneron Pharmaceuticals Inc. \$192.30 Bi-weekly payroll deduction Exec. Dir. - Assistant General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 769,20 Full Name (Last, First, Middle Initial) **c.** Robert Vitti Date of Receipt Mailing Address 777 Old Saw Mill River Road 02 19 2016 City State Zip Code Transaction ID: SA11AI.4579 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing С 192.30 federal political committee. Memo Item Name of Employer Occupation \$96.15 Bi-weekly payroll deduction Regeneron Pharmaceuticals Inc. VP Clinical Sciences - Ophthalmology Receipt For: Aggregate Year-to-Date ▼ Primary General 384.60 Other (specify) 961.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

	F	FOR LINE NUMBER: PAGE 10 OF								14	
Use separate schedule(s)	(c	(check only one)									
for each category of the Detailed Summary Page		X	11a		11b		11c		12		
			13		14		15		16		17

	Statements may not be sold or used by any pers e name and address of any political committee to				
NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Ir	nc. PAC				
Full Name (Last, First, Middle Initial) Mark Volpe Mailing Address 777 Old Saw Mill River Road		Date of Receipt 02 19 2016			
City					
Tarrytown FEC ID number of contributing federal political committee.	NY 10591	Amount of Each Receipt this Period			
Name of Employer Regeneron Pharmaceuticals Inc. Receipt For:	Occupation Vice President - Taxes Aggregate Year-to-Date ▼	Memo Item \$96.15 Bi-weekly payroll deduction			
Primary General Other (specify) ▼	384.60				
Full Name (Last, First, Middle Initial) 3.		Date of Receipt			
Mailing Address		M = M / D = D / Y = Y = Y			
City	State Zip Code	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С				
Name of Employer	Occupation	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼				
Full Name (Last, First, Middle Initial)		Date of Receipt			
Mailing Address		M = M / D = D / Y = Y = Y			
City	State Zip Code	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С				
Name of Employer	Occupation	- Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼				
SUBTOTAL of Receipts This Page (optional)	·····	192.30			
TOTAL This Period (last page this line number	only)	3846.00			

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 OF 14 (check only one)			
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) 11a			
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, In	name and address of any political commi	y person for the purpose of soliciting contributions ttee to solicit contributions from such committee.			
Full Name (Last, First, Middle Initial) Regeneron Pharmaceuticals, Inc. Mailing Address 777 Old Saw Mill River Road City Tarrytown FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code NY 10591 C Occupation Aggregate Year-to-Date ▼ 436.42	Date of Receipt M			
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
SUBTOTAL of Receipts This Page (optional)		436.42			
TOTAL This Period (last page this line number	only)	. ▶ 436.42			

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only X 21b 27			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc. F	ne and address of any political	by any perso committee to	on for the purpose of soliciting contributions solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) A. JP Morgan Chase Bank, NA Mailing Address Two Corporate Drive	A. JP Morgan Chase Bank, NA				
•	State Zip Code		Transaction ID : SB21B.4581		
Shelton Purpose of Disbursement Bank fees Candidate Name	CT 06484	001 Category/	Amount of Each Disbursement this Period		
	nent For: Primary General Other (specify)	Туре	Memo Item		
Full Name (Last, First, Middle Initial) B.			Date of Disbursement		
Mailing Address					
City	State Zip Code				
Purpose of Disbursement Candidate Name	[Category/	Amount of Each Disbursement this Period		
		Type	Memo Item		
Full Name (Last, First, Middle Initial) C.			Date of Disbursement		
Mailing Address	_				
City	State Zip Code				
Purpose of Disbursement Candidate Name	[Category	Amount of Each Disbursement this Period		
Office Sought: House Disburser Senate		Category/ Type	Memo Item		
SUBTOTAL of Disbursements This Page (optional)		·····•	436.42		
TOTAL This Period (last page this line number only).			436.42		

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	-	FOR LINE NUMBER: PAGE 13 OF 14		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 26 28a 28b 28c 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
Regeneron Pharmaceuticals, Inc. P	AC				
Full Name (Last, First, Middle Initial)			Data of Bishamanana		
A. CROWLEY FOR CONGRESS			Date of Disbursement		
Mailing Address 84-56 GRAND AVENUE			02 16 2016		
,	tate Zip Code		Transaction ID : SB23.4582		
ELMHURST Purpose of Disbursement	NY 11373				
Political Contribution		011	Amount of Each Disbursement this Period		
Candidate Name		Category/	2500.00		
JOSEPH CROWLEY Office Sought:	ent For: 2016	Туре			
Senate X	Primary General Other (specify) ▼		Memo Item		
State: NY District: 14					
Full Name (Last, First, Middle Initial) B. FRIENDS OF SCHUMER			Date of Disbursement		
Mailing Address 192 LEXINGTON AVENUE SUITE	1004		02 26 2016		
			02 20 2010		
NEW YORK	tate Zip Code NY 10016		Transaction ID : SB23.4588		
Purpose of Disbursement Political Contribution		011	Amount of Each Disbursement this Period		
Candidate Name		Category/	0700.00		
CHARLES E SCHUMER		Type	2700.00		
	ent For: 2016 Primary General		Memo Item		
	Other (specify) ▼				
Full Name (Last, First, Middle Initial)			D. (D.)		
C. FRIENDS OF SCHUMER			Date of Disbursement		
Mailing Address 192 LEXINGTON AVENUE SUITE 1001			02 26 2016		
•	tate Zip Code NY 10016		Transaction ID : SB23.4591		
Purpose of Disbursement Political Contribution					
Candidate Name		011	Amount of Each Disbursement this Period		
CHARLES E SCHUMER		Category/ Type	2700.00		
Senate President	ent For: 2016 Primary	71	Memo Item		
State: NY District: 00					
SUBTOTAL of Disbursements This Page (optional)		······ <u>▶</u>	7900.00		
TOTAL This Period (last page this line number only).		>			

TEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b 27			
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) Regeneron Pharmaceuticals, Inc. PAC						
Full Name (Last, First, Middle Initial) TOM REED FOR CONGRESS Mailing Address PO BOX 10847				Date of Disbursement O2 16 2016		
F F	,	State Zip Code NY 14610	011	Transaction ID : SB23.4585 Amount of Each Disbursement this Period		
\bar{2}{\alpha}	Candidate Name FHOMAS W II REED Office Sought: House Disbursem Senate	nent For: 2016 Primary General Other (specify)	Category/ Type	2500.00 Memo Item		
F 3.	full Name (Last, First, Middle Initial) Mailing Address			Date of Disbursement		
₽ ~	Purpose of Disbursement Candidate Name Office Sought: House Disbursem Senate	State Zip Code ment For: Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period Memo Item		
C. _	full Name (Last, First, Middle Initial)			Date of Disbursement		
Ē	Purpose of Disbursement Candidate Name Office Sought: House Disbursem Senate	State Zip Code nent For: Primary General Other (specify)	Category/ Type	Amount of Each Disbursement this Period Memo Item		
	BTOTAL of Disbursements This Page (optional)			2500.00		
TOTAL This Period (last page this line number only)						