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Image# 201606169018211079

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORW 3X   F	or Other Than An A	uthorized Committee	Office U	Jse Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Regeneron Pharmaceu	iticals, Inc. PAC			
ADDRESS (number and street)	777 Old Saw Mill River R	oad		
Check if different than previously reported. (ACC)	Tarrytown		NY 1059	1
2. FEC IDENTIFICATION NU	MBER ▼	CITY	STATE A	ZIP CODE 🛦
C C00562264	3.	IS THIS REPORT X (N) O	R AMENDED (A)	
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  April 15 Quarterly Report (Q: July 15 Quarterly Report (Q: Quarterly Report (Q: January 31 Year-End Report (YE July 31 Mid-Year	Report Due On:  N  (c) 12-Day  PRE-Election  Report for the:	Feb 20 (M2) May 20 (No. 1) May 20 (N	M6) Sep 20 (M9)	Nov 20 (M11) (Non-Election Year Only)  Dec 20 (M12) (Non-Election Year Only)  Jan 31 (YE)  Runoff (12R)  in the State of
Report (Non-election Year Only) (MY)  Termination Report (TER)	POST-Election Report for the:	` /	Runoff (30R)	Special (30S) in the State of
5. Covering Period 05	01 2016			)16
I certify that I have examined this Type or Print Name of Treasurer	•	of my knowledge and belief it is	s true, correct and comple	ete.
	t E. Landry	[Electronically Filed]	Date 06 16	6 2016
NOTE: Submission of false, errone	ous, or incomplete informa	tion may subject the person signir	ng this Report to the penalt	ies of 2 U.S.C. §437g.
Office Use				C FORM 3X Rev. 12/2004

## SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Regeneron Pharmaceuticals, Inc. PAC 05 01 2016 05 2016 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 77551.35 January 1, 2016 (b) Cash on Hand at 75319.49 Beginning of Reporting Period..... 4625.91 25241.87 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 102793.22 79945.40 6(a) and 6(c) for Column B)..... 4632.99 27480.81 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 75312.41 75312.41 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Regeneron Pharmaceuticals, In	C.	PAC
-------------------------------	----	-----

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
		Total This Period	Calendar fear-to-Date
. Co	ntributions (other than loans) From: Individuals/Persons Other		
(a)	Than Political Committees		
	(i) Itemized (use Schedule A)	4122.92	20868.42
	(i) hemized (use conclude 7)		
	(ii) Unitemized	70.00	2192.64
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶	4192.92	23061.06
(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		0004.00
	Totals to Line 33, page 5)▶	4192.92	23061.06
	Insfers From Affiliated/Other		
Pa	rty Committees	0.00	0.00
		0.00	0.00
All	Loans Received	0.00	0.00
	_		
	an Repayments Received	0.00	0.00
	sets To Operating Expenditures		
	efunds, Rebates, etc.)	400.00	0,000,01
	arry Totals to Line 37, page 5)	432.99	2180.81
	funds of Contributions Made		
	Federal Candidates and Other	0.00	0.00
	litical Committees	0.00	0.00
	ner Federal Receipts	0.00	0.00
	vidends, Interest, etc.)	0.00	0.00
	Non-Federal Account		
(a)	(from Schedule H3)	0.00	0.00
	(IIIIII Geriedale 110)	3.00	0.00
/I= \	Lavin France (france Cabadula 115)	0.00	0.00
(D)	Levin Funds (from Schedule H5)	7	3.00
	Total Transfers (add 18(a) and 18(b))	0.00	0.00
(c)	Total Transfers (add To(a) and To(b))	0.00	0.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		II. Disbursements COLUMN A Total This Period					
	ating Expenditures: -	iotai iiiis Fellou	Calendar Year-to-Date				
	Allocated Federal/Non-Federal Activity (from Schedule H4)						
	(i) Federal Share	0.00	0.00				
	`						
,	(ii) Non-Federal Share	0.00	0.00				
	Other Federal Operating	400.00	0400.04				
	Expenditures	432.99	2180.81				
	Total Operating Expenditures	432.99	2180.81				
	(add 21(a)(i), (a)(ii), and (b))▶	432.99	2100.01				
	mittees	0.00	0.00				
<ol><li>Contr</li></ol>	ributions to						
and (	ral Candidates/Committees Other Political Committees	4200.00	25300.00				
4. Indep	pendent Expenditures						
(use	Schedule E)	0.00	0.00				
<ol> <li>Coore</li> <li>(2 U.</li> </ol>	dinated Party Expenditures S.C. §441a(d))	222					
(use	S.C. §441a(d)) Schedule F)	0.00	0.00				
		0.00					
6. Loan	Repayments Made	0.00	0.00				
7		0.00	0.00				
7. Loan: 8. Refur	s Madends of Contributions To:	0.00					
(a) <u>I</u>	Individuals/Persons Other Than Political Committees	0.00	0.00				
	Than Folitical Committees	7	7 7				
(b) I	Political Party Committees	0.00	0.00				
	Other Political Committees						
` '	(such as PACs)	0.00	0.00				
(d)	Total Contribution Refunds	0.00					
(	(add Lines 28(a), (b), and (c))▶	0.00	0.00				
9. Other	r Disbursements	0.00	0.00				
0 Fada	ral Flaction Activity (0.11.C.C. \$401(00))						
	ral Election Activity (2 U.S.C. §431(20))  Allocated Federal Election Activity						
. ,	(from Schedule H6)						
	(i) Federal Share	0.00	0.00				
`	2						
(	(ii) "Levin" Share	0.00	0.00				
	Federal Election Activity Paid Entirely						
	With Federal Funds	0.00	0.00				
	Total Federal Election Activity (add	200					
	Lines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00				
	B						
	Disbursements (add Lines 21(c), 22,						
23, 2	24, 25, 26, 27, 28(d), 29 and 30(c))	4632.99	27480.81				
O Total	Federal Disbursements						
	ract Line 21(a)(ii) and Line 30(a)(ii)						
	Line 31)	4632.99	27480.81				
		1002.00	7 7 7				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

TEO TOTAL SX (Nev. 02/2005)		i age <b>3</b>
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	23061.06
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	23061.06
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	432.99	2180.81
7. Offsets to Operating Expenditures (from Line 15, page 3)	432.99	2180.81
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

	FOF	R LINE	NU	IMBER	:	PAGE	6 C	)F	14
Use separate schedule(s)	(che	ck only	or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c	12		
		13		14		15	16		717

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) Keith Anderson Date of Receipt Mailing Address 777 Old Saw Mill River Road 2016 27 City Zip Code State Transaction ID: SA11AI.4669 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer Occupation \$25.00 Bi-Weekly payroll deduction Sr. Staff Scientist Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 275.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ned Braunstein Date of Receipt Mailing Address 777 Old Saw Mill River Road 05 27 2016 City State Zip Code Transaction ID: SA11AI.4680 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 Sr. VP - Regulatory Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2115.30 Full Name (Last, First, Middle Initial) c. Scott Carver Date of Receipt Mailing Address 777 Old Saw Mill River Road 05 27 2016 City State Zip Code Transaction ID: SA11AI.4670 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 Scale Mfg. & Sciences Receipt For: Aggregate Year-to-Date ▼ Primary General 1057.65 Other (specify) 626.90 SUBTOTAL of Receipts This Page (optional).....

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

FOR LINE NUMBER: PAGE 7 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) Christopher Daly Date of Receipt Mailing Address 777 Old Saw Mill River Road 2016 27 City Zip Code State Transaction ID: SA11AI.4668 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing C 192.30 federal political committee. Memo Item Name of Employer Occupation \$96.15 Bi-Weekly payroll deduction Regeneron Pharmaceuticals Inc. Director - Oncology & Angiogenesis Receipt For: Aggregate Year-to-Date ▼ Primary General 1057.65 Other (specify) Full Name (Last, First, Middle Initial) B. Jeanette Fairhurst Date of Receipt Mailing Address 777 Old Saw Mill River Road 05 27 2016 City State Zip Code Transaction ID: SA11AI.4677 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer Occupation Regeneron Pharmaceuticals Inc. \$50 Bi-Weekly payroll deduction Senior Manager-Therapeutic Antibodies Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 550,00 Full Name (Last, First, Middle Initial) c. Chris Fenimore Date of Receipt Mailing Address 777 Old Saw Mill River Road 05 27 2016 City State Zip Code Transaction ID: SA11AI.4675 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 - Financial Planning Receipt For: Aggregate Year-to-Date ▼ Primary General 1057.65 Other (specify) 484.60 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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) Gregory Geba Date of Receipt Mailing Address 777 Old Saw Mill River Road 2016 27 City Zip Code State Transaction ID: SA11AI.4682 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 76.92 federal political committee. Memo Item Name of Employer Occupation \$38.46 Bi-Weekly payroll deduction VP Deputy Head - Clinical Development Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 423.06 Other (specify) Full Name (Last, First, Middle Initial) **B.** Patrice Gilooly Date of Receipt Mailing Address 777 Old Saw Mill River Road 05 27 2016 City State Zip Code Transaction ID: SA11AI.4683 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 192.30 federal political committee. Memo Item Name of Employer Occupation Regeneron Pharmaceuticals Inc. \$96.15 Bi-Weekly payroll deduction VP - QA & Operations Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1057.65 Full Name (Last, First, Middle Initial) c. Joseph LaRosa Date of Receipt Mailing Address 777 Old Saw Mill River Road 05 27 2016 City State Zip Code Transaction ID: SA11AI.4672 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 - General Counsel & Secretary Receipt For: Aggregate Year-to-Date ▼ Primary General 2115.30 Other (specify) 653.82 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 9 OF Use separate schedule(s) (check only one)

TEMIZED R	ECEIPTS		for each category of the Detailed Summary Page	X   11a
				erson for the purpose of soliciting contributions to solicit contributions from such committee.
	MMITTEE (In Full) n Pharmaceuticals, In	c. PAC		
City Tarrytown  FEC ID number federal political  Name of Employ Regeneron Phate Receipt For: Primary Other (sp	er of contributing committee.  oyer armaceuticals Inc.  General Decify)		Zip Code 10591 Il Sciences Trans. Medicine Year-to-Date ▼	Date of Receipt    Mark   27
Address  City  Tarrytown  FEC ID number federal political  Name of Emplo	oyer armaceuticals Inc.	'	Zip Code 10591  rate Communications  Year-to-Date ▼  2115.30	Date of Receipt    Mark
City Tarrytown FEC ID number federal political	er of contributing committee.  over armaceuticals Inc.		Zip Code 10591 search Regeneron Labs Year-to-Date ▼	Date of Receipt    M M M
SUBTOTAL of R	leceipts This Page (optional)			1153.80
TOTAL This Peri	iod (last page this line number	only)		

lles semenate selectivis/s)		RLINE			:	PAGE	1	10 C	F	14
Use separate schedule(s) for each category of the	(check only one)									
Detailed Summary Page	×	11a		11b		11c		12		
, 3		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) William Olson Date of Receipt Mailing Address 777 Old Saw Mill River Road 2016 27 City State Zip Code Transaction ID: SA11AI.4671 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 2115.30 Other (specify) Full Name (Last, First, Middle Initial) B. Tor Smeland Date of Receipt Mailing Address 777 Old Saw Mill River Road 05 27 2016 City State Zip Code Transaction ID: SA11AI.4679 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) 2115.30 Full Name (Last, First, Middle Initial) **c.** Robert Vitti Date of Receipt Mailing Address 777 Old Saw Mill River Road 2016 05 27 City State Zip Code Transaction ID: SA11AI.4685 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

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

1057.65

Aggregate Year-to-Date ▼

Receipt For:

Primary

Other (specify)

General

Other (specify)

Full Name (Last First Middle Initial)

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

	F	OR	LINE	NU	MBER	:	PAGE	1	11	OF	14
Use separate schedule(s) for each category of the	(0	he	ck only	or	ne)						
Detailed Summary Page		X	11a		11b		11c		12		
			13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) Mark Volpe Date of Receipt Mailing Address 777 Old Saw Mill River Road 27 2016 City State Zip Code Transaction ID: SA11AI.4673 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing C 192.30 federal political committee. Memo Item Name of Employer Occupation \$96.15 Bi-Weekly payroll deduction Vice President - Taxes Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1057.65 Other (specify) Full Name (Last, First, Middle Initial) B. Stephen Westing Date of Receipt Mailing Address 777 Old Saw Mill River Road 05 27 2016 City State Zip Code Transaction ID: SA11AI.4686 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Memo Item Name of Employer Occupation Regeneron Pharmaceuticals Inc. \$25.00 Bi-Weekly payroll deduction Dir. Med Aff. - Opthalmology Sciences Receipt For: Aggregate Year-to-Date ▼ Primary General

i dii Name (Last, i iist, iviidde iiitiai)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y
City	State Zip Code	
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	
Name of Employer	Occupation	Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	

275.00

SUBTOTAL of Receipts This Page (optional)		Ξ	7	Ī	Ī	- 1	Ī	242.30	
TOTAL This Period (last page this line number only)		_	7	_	_	7	_	4122.92	

7 7 7

C.

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)					
ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)  11a				
Any information copied from such Reports and State or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)		erson for the purpose of soliciting contributions				
Regeneron Pharmaceuticals, Inc	c. PAC					
Full Name (Last, First, Middle Initial)  Regeneron Pharmaceuticals, Inc.  Mailing Address 777 Old Saw Mill River Road		Date of Receipt				
City	State Zip Code NY 10591	05 25 2016 Transaction ID : SA15.4688				
Tarrytown  FEC ID number of contributing federal political committee.	C 10591	Amount of Each Receipt this Period 432.99				
Name of Employer	Occupation	Memo Item Reimbursement of Expenses - Bank fees				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  1312.47					
Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt				
Mailing Address  City	State Zip Code	M = M / D = D / Y = Y = Y				
-	Diagram 2 p Code	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	Memo Item				
Name of Employer	Occupation					
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼					
Full Name (Last, First, Middle Initial) C.		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.	C	□ Mana han				
Name of Employer	Occupation	Memo Item				
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼					
SUBTOTAL of Receipts This Page (optional)		432.99				
TOTAL This Period (last page this line number o	nly)	432.99				

To reach category of the potaled Summary Page   22   23   24   25   25   24   25   25   25   26   26   25   25   26   26	SCHEDULE B (FEC Form 3X)	Llea caparata ashadula(s)	FOR LINE NUMBER: PAGE 13 OF 14			
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)  JP Morgan Chase Bank, NA  Mailing Address Two Corporate Drive  City  State  City  State  City  State  Disbursement  Disbursement  Disbursement  Disbursement  Disbursement  Disbursement  Disbursement For:  Senate  Prissiont  Category/ Type  Memo Item  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item	TEMIZED DISBURSEMENTS		X 21b 22 25			
NAME OF COMMITTEE (in Full) Regeneron Pharmaceuticals, Inc. PAC  Full Name (Last, First, Middle Initial) JP Morgan Chase Bank, NA  Mailing Address Two Corporate Drive  City Shalton CT 06484  Furpose of Disbursement Bank fees  Cotter (specify) Full Name (Last, First, Middle Initial)  Mailing Address  City State: District:  Category Type  Memo Item  Date of Disbursement this Perior  Category Type  Memo Item  Amount of Each Disbursement this Perior  Category Type  Memo Item  Date of Disbursement this Perior  Category Type  Memo Item  Amount of Each Disbursement this Perior  Category Type  Memo Item  Date of Disbursement  Category Type  Memo Item  Amount of Each Disbursement this Perior  Category Type  Memo Item  Amount of Each Disbursement this Perior  Category Type  Memo Item  Amount of Each Disbursement this Perior  Category Type  Memo Item  Amount of Each Disbursement this Perior  Category Type  Memo Item  Amount of Each Disbursement this Perior  Category Type  Memo Item  Amount of Each Disbursement this Perior  Category Type  Memo Item  Amount of Each Disbursement this Perior  Category Type  Memo Item  Amount of Each Disbursement this Perior  Category Type  Memo Item  Amount of Each Disbursement this Perior  Category Type  Memo Item  Amount of Each Disbursement this Perior  Category Type  Memo Item			l by any perso	n for the purpo	ose of soliciting contributions	
A JP Morgan Chase Bank, NA  Mailing Address Two Corporate Drive  City Shetton CT 06494  Purpose of Disbursement  Candidate Name  City State:  District:  Full Name (Last, First, Middle Initial)  State:  District:  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Date of Disbursement this Perior  Category/ Type  Memo Item  Date of Disbursement this Perior  Category/ Type  Memo Item  Date of Disbursement this Perior  Category/ Type  Memo Item  Amount of Each Disbursement this Perior  Category/ Type  Memo Item  Date of Disbursement this Perior  Category/ Type  Memo Item  Date of Disbursement this Perior  Category/ Type  Memo Item  Date of Disbursement this Perior  Category/ Type  Memo Item  Date of Disbursement this Perior  Category/ Type  Memo Item  Date of Disbursement this Perior  Category/ Type  Memo Item  Date of Disbursement this Perior  Category/ Type  Memo Item  Date of Disbursement this Perior  Category/ Type  Memo Item  Memo Item  Memo Item  Memo Item	NAME OF COMMITTEE (In Full)	•	committee to	Solicit Contribu	nions from such committee.	
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Shelton CT 06484  Purpose of Disbursement Bank fees  Candidate Name  Office Sought:	Mailing Address Two Corporate Drive					
Purpose of Disbursement Bank fees  Candidate Name  Office Sought:				Transactio	on ID : SB21B.4689	
Office Sought:	Purpose of Disbursement	33.3	001	Amount of E	Each Disbursement this Period	
Office Sought: House President Primary General President State: District:  Full Name (Last, First, Middle Initial) 3.	Candidate Name				432.99	
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City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  State: District:  SUBTOTAL of Disbursements This Page (optional)	C.					
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SCHEDULE B (FEC Form 3X)					
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)			
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b		
Any information copied from such Reports and Statem	l nents may not be sold or use				
or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
Regeneron Pharmaceuticals, Inc. F	PAC				
Full Name (Last, First, Middle Initial)			Data of Bisham		
A. BADGERPAC			Date of Disbursement		
Mailing Address PO BOX 184			05 20 2016		
•	State Zip Code		Transaction ID : SB23.4698		
LA CROSSE	WI 54602		1141134CHOH ID . 0D23.4030		
Purpose of Disbursement Political contribution		011	Amount of Each Disbursement this Period		
Candidate Name					
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3. CROWLEY FOR CONGRESS			Date of Disbursement		
Mailing Address 84-56 GRAND AVENUE			05 20 2016		
,	State Zip Code NY 11373		Transaction ID : SB23.4690		
Purpose of Disbursement	113/3				
Political contribution			Amount of Each Disbursement this Period		
Candidate Name		Category/	1500.00		
JOSEPH CROWLEY  Office Sought:	nent For: 2016	Туре			
	Primary Seneral		Memo Item		
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State: NY District: 14					
Full Name (Last, First, Middle Initial)			Dete of Dishuranment		
<b>.</b> .			Date of Disbursement		
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			4200.00		
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TOTAL This Period (last page this line number only)			4200.00		