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Image# 201510199003104107

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X Fo	or Other Than An Au	uthorized Committee	;	Office Use Only
1. NAME OF T COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typing over the lines.	, 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 ▼	CITY A	STATE ▲	ZIP CODE ▲
C C00562264	3.	IS THIS REPORT X (N)		MENDED)
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: M (c) 12-Day PRE-Election Report for the: (d) 30-Day POST-Election Report for the:	Primary (12P) Convention (12 Stion on General (30G)	n 20 (M6) Sep I 20 (M7) X Oct General	in the State of
5. Covering Period 09	01 2015		09 / 30 /	2015
I certify that I have examined this Type or Print Name of Treasurer	Report and to the best Robert E. Landry	of my knowledge and be	lief it is true, correct and	d complete.
Signature of Treasurer Robert	E. Landry	[Electronically I		19 / 2015
NOTE: Submission of false, erroned Office	ous, or incomplete information	tion may subject the perso	n signing this Report to the	FEC FORM 3X
Use Only				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 09 01 2015 09 30 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 22658.61 January 1, 2015 (b) Cash on Hand at 64394.58 Beginning of Reporting Period..... 50247.18 5011.51 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 69406.09 72905.79 6(a) and 6(c) for Column B)..... 2933.99 6433.69 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 66472.10 66472.10 (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, Inc. PAC

(other than loans) From: Is/Persons Other Ilitical Committees zed (use Schedule A)	Total This Period 4507.52 70.00 4577.52 0.00 4577.52 0.00 0.00 0.00 0.00	Calendar Year-to-Date 43837.00 2476.49 46313.49 0.00 46313.49 0.00 0.00
Is/Persons Other Ilitical Committees zed (use Schedule A)	70.00 4577.52 0.00 0.00 4577.52	2476.49 46313.49 0.00 46313.49 0.00 0.00
zed (use Schedule A)	70.00 4577.52 0.00 0.00 4577.52	2476.49 46313.49 0.00 46313.49 0.00 0.00
mized	70.00 4577.52 0.00 0.00 4577.52	2476.49 46313.49 0.00 46313.49 0.00 0.00
AL (add 5 11(a)(i) and (ii)	4577.52 0.00 0.00 4577.52 0.00 0.00	46313.49 0.00 0.00 46313.49 0.00
AL (add 5 11(a)(i) and (ii)	4577.52 0.00 0.00 4577.52 0.00 0.00	46313.49 0.00 0.00 46313.49 0.00
Party Committees	0.00 0.00 4577.52 0.00 0.00	0.00 0.00 46313.49 0.00
Party Committees	0.00 0.00 4577.52 0.00 0.00	0.00 0.00 46313.49 0.00
plitical Committees PACs)	0.00 4577.52 0.00 0.00	0.00 46313.49 0.00 0.00
plitical Committees PACs)	4577.52 0.00 0.00	46313.49 0.00 0.00
ntributions (add Lines (b), and (c)) (Carry Line 33, page 5) m Affiliated/Other ttees ceived perating Expenditures bates, etc.)	4577.52 0.00 0.00	46313.49 0.00 0.00
(b), and (c)) (Carry Line 33, page 5) m Affiliated/Other ttees ceived nents Received perating Expenditures bates, etc.)	0.00	0.00
Line 33, page 5)	0.00	0.00
m Affiliated/Other Itees	0.00	0.00
ceived	0.00	0.00
nents Received perating Expenditures bates, etc.)	0.00	0.00
nents Received perating Expenditures bates, etc.)		
nents Received perating Expenditures bates, etc.)		
perating Expenditures bates, etc.)	0.00	0.00
perating Expenditures bates, etc.)	0.00	0.00
bates, etc.)		
· · · · · · · · · · · · · · · · · · ·		
to Line 37, page 5)	433.99	3933.69
ontributions Made		
andidates and Other		
	0.00	0.00
I Receipts		
nterest, etc.)	0.00	0.00
m Non-Federal and Levin Funds 🔚		
ral Account		
hedule H3)	0.00	0.00
ds (from Schedule H5)	0.00	0.00
sfers (add 18(a) and 18(b))	0.00	0.00
r e	mittees	mittees

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
1. (Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tillo I Ollow	Julichidal Teal-to-Date
	Activity (from Schedule H4) (i) Federal Share	0.00	0.00
	(i) Tederal Share		
	(ii) Non-Federal Share	0.00	0.00
((b) Other Federal Operating		
,	Expenditures	433.99	3933.69
((c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	433.99	3933.69
-	Transfers to Affiliated/Other Party	400.00	3333.03
	Committees	0.00	0.00
(Contributions to Federal Candidates/Committees		7 7 7
6	and Other Political Committees	2500.00	2500.00
	Independent Expenditures	0.00	0.00
((use Schedule E)	0.00	0.00
((2 U.S.C. §441a(d)) use Schedule F)	0.00	0.00
(use seriedale i /	7	
L	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	(a) Individuals/Persons Other	0.00	0.00
	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
	(ddd Eilico 20(d), (b), dild (b))		7
(Other Disbursements	0.00	0.00
		, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,
	Federal Election Activity (2 U.S.C. §431(20))		
((a) Allocated 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	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
٦	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	2933.99	6433.69
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
f	from Line 31)	2933.99	6433.69

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)	4577.52	46313.49
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4577.52	46313.49
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	433.99	3933.69
7. Offsets to Operating Expenditures (from Line 15, page 3)	433.99	3933.69
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FOR LINE NUMBER: PAGE 6 OF 14 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the 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) Keith Anderson Date of Receipt Mailing Address 777 Old Saw Mill River Road 2015 City Zip Code State Transaction ID: SA11AI.4405 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Bi-weekly payroll deduction: \$25.00 Name of Employer Occupation Sr. Staff Scientist Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 475.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ned Braunstein Date of Receipt Mailing Address 777 Old Saw Mill River Road 09 18 2015 City State Zip Code Transaction ID: SA11AI.4417 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 federal political committee. Bi-weekly payroll deduction: \$192.30 Name of Employer Occupation Regeneron Pharmaceuticals Inc. Sr. VP - Regulatory Affairs Receipt For: Aggregate Year-to-Date ▼ Primary General 3653.70 Other (specify) Full Name (Last, First, Middle Initial) c. Scott Carver Date of Receipt Mailing Address 777 Old Saw Mill River Road 09 18 2015 City State Zip Code Transaction ID: SA11AI.4406 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 192.30 С federal political committee. Bi-weekly payroll deduction: \$96.15 Name of Employer Occupation Regeneron Pharmaceuticals Inc. VP- Clinical Scale Mfg. & Sciences Receipt For: Aggregate Year-to-Date ▼ Primary General 1826.85 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) X 11a 11b 12 11c

for each category of the 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 2015 City Zip Code State Transaction ID: SA11AI.4404 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 192.30 federal political committee. Bi-weekly payroll deduction: \$96.15 Name of Employer Occupation Regeneron Pharmaceuticals Inc. Director - Oncology & Angiogenesis Receipt For: Aggregate Year-to-Date ▼ Primary General 1826.85 Other (specify) Full Name (Last, First, Middle Initial) B. Jeanette Fairhurst Date of Receipt Mailing Address 777 Old Saw Mill River Road 09 18 2015 City State Zip Code Transaction ID: SA11AI.4413 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Bi-weekly payroll deduction: \$50.00 Name of Employer Occupation Regeneron Pharmaceuticals Inc. Senior Manager-Therapeutic Antibodies Receipt For: Aggregate Year-to-Date ▼ Primary General 950.00 Other (specify) Full Name (Last, First, Middle Initial) c. Chris Fenimore Date of Receipt Mailing Address 777 Old Saw Mill River Road 09 18 2015 City State Zip Code Transaction ID: SA11AI.4411 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 192.30 С federal political committee. Bi-weekly payroll deduction: \$96.15 Name of Employer Occupation Regeneron Pharmaceuticals Inc. VP - Financial Planning Receipt For: Aggregate Year-to-Date ▼ Primary General 1826.85 Other (specify) 484.60 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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

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(c	he	ck only	or	ıe)				
	X	11a		11b	11c	12	!	
		13		14	15	16	;	17

	nd Statements may not be sold or used by any per the name and address of any political committee	
NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals	, Inc. PAC	
Full Name (Last, First, Middle Initial) A. Gregory Geba		Date of Receipt
Mailing Address 777 Old Saw Mill River Ro	pad	09 18 2015
City	State Zip Code	Transaction ID : SA11AI.4419
Tarrytown	NY 10591	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.92
Name of Employer	Occupation	Bi-weekly payroll deduction: \$38.46
Regeneron Pharmaceuticals Inc.	VP Deputy Head - Clinical Development	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	730.74	
Full Name (Last, First, Middle Initial) Patrice Gilooly		Date of Receipt
Mailing Address 777 Old Saw Mill River Ro	pad	M = M / D = D / Y = Y = Y
O:h .	Chata 7:- Cada	09 18 2015
City	State Zip Code NY 10591	Transaction ID : SA11AI.4420
Tarrytown	NY 10591	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	192.30
Name of Employer	Occupation	Bi-weekly payroll deduction: \$96.15
Regeneron Pharmaceuticals Inc.	VP - QA & Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1826.85	
Full Name (Last, First, Middle Initial)		Pate of Passivi
C. Joseph LaRosa		Date of Receipt
Mailing Address 777 Old Saw Mill River Ro	oad	09 18 _2015 _
City	State Zip Code	Transaction ID : SA11AI.4408
Tarrytown	NY 10591	Amount of Each Receipt this Period
FEC ID number of contributing		7 thouse of Each Hoodipt this Foliad
federal political committee.	C	384.60
Name of Employer	Occupation	Bi-weekly payroll deduction: \$192.30
Regeneron Pharmaceuticals Inc.	Sr. VP - General Counsel & Secretary	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	3653.70	
SUBTOTAL of Receipts This Page (optional)	653.82
TOTAL This Period (last page this line num	ber only)	

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) Scott Mellis Date of Receipt Mailing Address 777 Old Saw Mill River Road 2015 City Zip Code State Transaction ID: SA11AI.4403 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 federal political committee. Bi-weekly payroll deduction: \$192.30 Name of Employer Occupation VP - Clinical Sciences Trans. Medicine Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 3653.70 Other (specify) Full Name (Last, First, Middle Initial) B. Hala Mirza Date of Receipt Mailing Address 777 Old Saw Mill River Road 09 18 2015 City State Zip Code Transaction ID: SA11AI.4402 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 federal political committee. Bi-weekly payroll deduction: \$192.30 Name of Employer Occupation Regeneron Pharmaceuticals Inc. VP - Corporate Communications Receipt For: Aggregate Year-to-Date ▼ Primary General 3653.70 Other (specify) Full Name (Last, First, Middle Initial) c. Andrew Murphy Date of Receipt Mailing Address 777 Old Saw Mill River Road 09 18 2015 City State Zip Code Transaction ID: SA11AI.4423 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 С federal political committee. Bi-weekly payroll deduction: \$192.30 Name of Employer Occupation Regeneron Pharmaceuticals Inc. Sr. VP - Research Regeneron Labs Receipt For: Aggregate Year-to-Date ▼ Primary General 1153.80 Other (specify) 1153.80 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 10 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 2015 City Zip Code State Transaction ID: SA11AI.4407 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 federal political committee. Bi-weekly payroll deduction: \$192.30 Name of Employer Occupation VP - Research & Development Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 3653.70 Other (specify) Full Name (Last, First, Middle Initial) B. Jeffrey Skulsky Date of Receipt Mailing Address 777 Old Saw Mill River Road 09 18 2015 City State Zip Code Transaction ID: SA11AI.4415 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 federal political committee. Bi-weekly payroll deduction: \$192.30 Name of Employer Occupation Regeneron Pharmaceuticals Inc. VP - Info Systems and Technologies Receipt For: Aggregate Year-to-Date ▼ Primary General 3653.70 Other (specify) Full Name (Last, First, Middle Initial) c. Tor Smeland Date of Receipt Mailing Address 777 Old Saw Mill River Road 09 18 2015 City State Zip Code Transaction ID: SA11AI.4416 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 С federal political committee. Bi-weekly payroll deduction: \$192.30 Name of Employer Occupation Exec. Dir. - Assistant General Counsel Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 3653.70 Other (specify) 1153.80 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 11 OF 14 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the 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) Robert Vitti Date of Receipt Mailing Address 777 Old Saw Mill River Road 2015 City Zip Code State Transaction ID: SA11AI.4422 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing C 192.30 federal political committee. Bi-weekly payroll deduction: \$96.15 Name of Employer Occupation VP Clinical Sciences - Ophthalmology Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1153.80 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Volpe Date of Receipt Mailing Address 777 Old Saw Mill River Road 09 18 2015 City State Zip Code Transaction ID: SA11AI.4409 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 192.30 federal political committee. Bi-weekly payroll deduction: \$96.15 Name of Employer Occupation Regeneron Pharmaceuticals Inc. Executive Director - Tax Receipt For: Aggregate Year-to-Date ▼ Primary General 1826.85 Other (specify) Full Name (Last, First, Middle Initial) c. Stephen Westing Date of Receipt Mailing Address 777 Old Saw Mill River Road 09 18 2015 City Zip Code State Transaction ID: SA11AI.4421 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Bi-weekly payroll deduction: \$25.00 Name of Employer Occupation Regeneron Pharmaceuticals Inc. Dir. Med Aff. - Opthalmology Sciences Receipt For: Aggregate Year-to-Date ▼ Primary General 475.00 Other (specify) 434.60 SUBTOTAL of Receipts This Page (optional)..... 4507.52 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X)	112-1-12-12-12-12-12-12-12-12-12-12-12-1	FOR LINE NUMBER: PAGE 12 OF 14
TEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)
	Detailed Summary Page	11a 11b 11c 12 13 14 X 15 16 17
Any information copied from such Reports and Stat or for commercial purposes, other than using the n		rson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc.	PAC	
Full Name (Last, First, Middle Initial) A. Regeneron Pharmaceuticals, Inc.		Date of Receipt
Mailing Address 777 Old Saw Mill River Road		09 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Tarrytown	State Zip Code NY 10591	Transaction ID : SA15.4424
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 433.99
Name of Employer	Occupation	Reimbursement of previously paid admin. expense (i.e., bank fees)
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3933.69	
Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt
City	State Zip Code	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
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.	C	
Name of Employer	Occupation	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		433.99
TOTAL This Period (last page this line number on	ly)	433.99

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) A. JP Morgan Chase Bank, NA Mailing Address Two Corporate Drive City State Zip Code Shelton CT 08484 Purpose of Disbursement Bank Fees Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Category/ Type Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) Full Name (Last, First, Middle Initial) Date of Disbursement this Period Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) Full Name (Last, First, Middle Initial)	SCHEDULE B (FEC Form 3X)	Llea caparata cabadula/a	FOR LINE I		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 COMINTTEE (in Ptal) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) A. JP Morgan Chase Bank, NA Malling Address Two Corporate Drive City State Zip Code Shelton CT 06484 Purpose of Disbursement Bank Fees Candidate Name Office Sought: House Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category' Type Office Sought: House Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Disbursement Candidate Name Office Sought: House Primary General Other (specify) ▼ State: District Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category' Type Office Sought: House Primary General Other (specify) ▼ State: District Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category' Type Office Sought: House Primary General Other (specify) ▼ State: District Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category' Type Office Sought: House Primary General Other (specify) ▼ State: District State: Disbursement Tor: Category' Type Office Sought: House Primary General Other (specify) ▼ State: District State: Disbursement Tor: Category' Type Office Sought: House Primary General Other (specify) ▼ State: Disbursement Tor: Category' Type Office Sought: House Primary General Other (specify) ▼ State: Disbursement Tor: Category' Type Office Sought: House Primary General Other (specify) ▼ State: Disbursement Tor: Category' Type Office Sought: House Primary General Other (specify) ▼ Amount of Each Disbursement this Period Other (specify) ▼ Amount of Each Disbursement this Period Other (specify) ▼	ITEMIZED DISBURSEMENTS	for each category of the	X 21b	22 23	
NAME OF COMMITTEE (in Full) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) Name (Last, First, Middle Initia					
A JP Morgan Chase Bank, NA Mailing Address Two Corporate Drive City State Zip Code CT 06484 Purpose of Disbursement Bank Fees Candidate Name Candidate Name District: Full Name (Last, First, Middle Initial) Sanate President State: District: Full Name (Last, First, Middle Initial) Sanate President State: District: Full Name (Last, First, Middle Initial) Sanate President State: District: Full Name (Last, First, Middle Initial) Sanate President State: District: Full Name (Last, First, Middle Initial) Sanate President State: District: Full Name (Last, First, Middle Initial) Sanate President State: District: Full Name (Last, First, Middle Initial) Sanate President State: District: Full Name (Last, First, Middle Initial) Category' Type Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Category' Type Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Category' Type Office Sought: House Senate President State: District: Sanate President Other (specify) Amount of Each Disbursement this Period Category' Type Office Sought: House Senate Primary General Primary General State: District: Sanate President Other (specify) Amount of Each Disbursement this Period Category' Type Office Sought: House Senate Primary General Primary General State: District: Sanate President Other (specify) Amount of Each Disbursement this Period Category' Type Amount of Each Disbursement this Period Category' Type Office Sought: House Senate Primary General Primary Gener	NAME OF COMMITTEE (In Full)		Committee to	Solicit Contribution	ons non such commuce.
Mailing Address Two Corporate Drive City State Zip Code CT 06484 Purpose of Disbursement Bank Fees Candidate Name Category/ Type Office Sought: House Senate Primary General Primary Gen	_			D : (D:1	
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