

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

ADDRESS (number and street) **2350 KERNER BLVD., SUITE 250**  
Check if different than previously reported. (ACC) **SAN RAFAEL CA 94901**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00543371** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period   /   /    through   /   /

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 **GIBSON, HILARY J., , ,**

Signature of Treasurer **GIBSON, HILARY J., , ,** [Electronically Filed] Date   /   /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="20732.13"/>	<input type="text" value="20732.13"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="17767.10"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="4947.90"/>	<input type="text" value="61082.87"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="22715.00"/>	<input type="text" value="81815.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="19100.00"/>	<input type="text" value="78200.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3615.00"/>	<input type="text" value="3615.00"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC

Report Covering the Period: From: 09 / 01 / 2016 To: 09 / 30 / 2016

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		
(i) Itemized (use Schedule A).....	4947.90	58426.03
(ii) Unitemized .....	0.00	2656.84
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4947.90	61082.87
(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) .....	4947.90	61082.87
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 Transfers (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)).....▶	4947.90	61082.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4947.90	61082.87

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19100.00	78200.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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 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)) ..	19100.00	78200.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19100.00	78200.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4947.90	61082.87
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4947.90	61082.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. BARNES, LESLIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4149 CASPER WAY  
 City NAPA State CA Zip Code 94558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, DEVELOPMENT SCIENCES OPEI  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 09 / 02 / 2016  
**Transaction ID : INCA1273**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

**B. BIENAIME, JEAN JACQUES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2510 SKYFARM DR  
 City Hillsborough State CA Zip Code 94010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3840.00

Date of Receipt 09 / 02 / 2016  
**Transaction ID : INCA1274**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**C. BLUM, ARTHUR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 FAIRVIEW AVE  
 City Corte Madera State CA Zip Code 94925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VICE PRESIDENT, REGULATORY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 09 / 02 / 2016  
**Transaction ID : INCA1275**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	337.00
<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 7 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. CLARKE, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 ILLINOIS STREET #210  
 City San Francisco State CA Zip Code 94107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) SVP, PRODUCT DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2146.84

Date of Receipt 09 / 02 / 2016  
**Transaction ID : INCA1276**  
 Amount of Each Receipt this Period 115.00  
 Memo Item

**B. DAVIS, G. ERIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 490 SONOMA MOUNTAIN RD  
 City Petaluma State CA Zip Code 94954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) SVP, GENERAL COUNSEL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3846.03

Date of Receipt 09 / 02 / 2016  
**Transaction ID : INCA1277**  
 Amount of Each Receipt this Period 192.30  
 Memo Item

**C. ESCANDON, RAFAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43 EDINBURGH ST.  
 City SAN FRANCISCO State CA Zip Code 94112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, DEVELOPMENT SCIENCES OPEP  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 09 / 02 / 2016  
**Transaction ID : INCA1278**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	407.30
<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 OF 29
<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)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. FOUTS, ERIK T., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 BLACK OAK LANE  
 City Novato State CA Zip Code 94947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, MANUFACTURING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1510.00

Date of Receipt 09 / 02 / 2016  
**Transaction ID : INCA1279**  
 Amount of Each Receipt this Period 80.00  
 Memo Item

**B. FUCHS, HENRY J., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 57 AVILA STREET  
 City SAN FRANCISCO State CA Zip Code 94123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) EVP, CHIEF MEDICAL OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 02 / 2016  
**Transaction ID : INCA1280**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**C. GOLD, DANIEL S., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3223 SANTIAGO STREET  
 City SAN FRANCISCO State CA Zip Code 94116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, PROCESS SCIENCES  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2016  
**Transaction ID : INCA1281**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	280.00
<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 10 OF 29
<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)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. MUELLER, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 OLIVE  
 City Larkspur State CA Zip Code 94939  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) GVP, CONTROLLER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt  
 09 / 02 / 2016  
**Transaction ID : INCA1285**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. NOONBERG, SARAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 DIGITAL DRIVE  
 City NOVATO State CA Zip Code 94707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) GVP, HEAD OF CLINICAL DEVELOPM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt  
 09 / 02 / 2016  
**Transaction ID : INCA1286**  
 Amount of Each Receipt this Period  
 40.00  
 Memo Item

**C. O'NEILL, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 170  
 City Vineburg State CA Zip Code 95487  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, PHARMACOLOGICAL SCIENCE  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt  
 09 / 02 / 2016  
**Transaction ID : INCA1287**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	240.00
<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 11 OF 29
<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)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. PALLANSCH, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 668

City LOPEZ ISLAND	State WA	Zip Code 98261
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BIOMARIN	Occupation (for Individual) VP, MEDICAL AFFAIRS
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2016

**Transaction ID : INCA1288**

Amount of Each Receipt this Period  
20.00

Memo Item

**B. SIMPSON, CAMILLA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 770 LINDARO ST.

City San Rafael	State CA	Zip Code 94901
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BIOMARIN	Occupation (for Individual) GVP GLOBAL REGULATORY AFFAIR
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2016

**Transaction ID : INCA1289**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. SLUZKY, VICTORIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29 MADERA DEL PRESIDIO DRIVE

City Corte Madera	State CA	Zip Code 94925
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BIOMARIN	Occupation (for Individual) GVP, QUALITY AND PROCESS DEVEI
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1425.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2016

**Transaction ID : INCA1290**

Amount of Each Receipt this Period  
75.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	145.00
<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 12 OF 29
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. SPIEGELMAN, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 STANFORD AVE  
 City Palo Alto State CA Zip Code 94306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) EXECUTIVE VICE PRESIDENT, CHIEF  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2016  
**Transaction ID : INCA1291**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. TENEROWICZ, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Magee Court  
 City Moraga State CA Zip Code 94556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BioMarin Occupation (for Individual) VP, Supply Chain and Logistics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2016  
**Transaction ID : INCA1292**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. BARNES, LESLIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4149 CASPER WAY  
 City NAPA State CA Zip Code 94558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, DEVELOPMENT SCIENCES OPER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1294**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	170.00
<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 13 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. BIENAIME, JEAN JACQUES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2510 SKYFARM DR  
 City Hillsborough State CA Zip Code 94010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3840.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1295**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

**B. BLUM, ARTHUR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 FAIRVIEW AVE  
 City Corte Madera State CA Zip Code 94925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VICE PRESIDENT, REGULATORY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1296**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. CLARKE, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 ILLINOIS STREET #210  
 City San Francisco State CA Zip Code 94107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) SVP, PRODUCT DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2146.84

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1297**  
 Amount of Each Receipt this Period 115.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	382.00
<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 14 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. DAVIS, G. ERIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 490 SONOMA MOUNTAIN RD  
 City Petaluma State CA Zip Code 94954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) SVP, GENERAL COUNSEL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3846.03

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1298**  
 Amount of Each Receipt this Period 192.30  
 Memo Item

**B. ESCANDON, RAFAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43 EDINBURGH ST.  
 City SAN FRANCISCO State CA Zip Code 94112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, DEVELOPMENT SCIENCES OPE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1299**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. FOUTS, ERIK T., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 BLACK OAK LANE  
 City Novato State CA Zip Code 94947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, MANUFACTURING  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1510.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1300**  
 Amount of Each Receipt this Period 80.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	372.30
<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 15 OF 29
<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)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. FUCHS, HENRY J., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 57 AVILA STREET  
 City SAN FRANCISCO State CA Zip Code 94123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) EVP, CHIEF MEDICAL OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2016  
**Transaction ID : INCA1301**  
 Amount of Each Receipt this Period  
 150.00  
 Memo Item

**B. GOLD, DANIEL S., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3223 SANTIAGO STREET  
 City SAN FRANCISCO State CA Zip Code 94116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, PROCESS SCIENCES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2016  
**Transaction ID : INCA1302**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. GRASS, JOSHUA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 196 CASTLE HILL RANCH ROAD  
 City WALNUT CREEK State CA Zip Code 94595  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) SVP, BUSINESS & CORPORATE DEVI  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 16 / 2016  
**Transaction ID : INCA1303**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	275.00
<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 16 OF 29
<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)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. HITCHNER, KENNETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 BUENA VISTA ST  
 City Moss Beach State CA Zip Code 94038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1304**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. LO SCALZO, PHILIP, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 448 IGNACIO BLVD., #346  
 City Novato State CA Zip Code 94949  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) SVP, CORPORATE COMPLIANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1305**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**C. MUELLER, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 OLIVE  
 City Larkspur State CA Zip Code 94939  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) GVP, CONTROLLER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1306**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	165.00
<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 17 OF 29
<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)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. NOONBERG, SARAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 DIGITAL DRIVE  
 City NOVATO State CA Zip Code 94707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) GVP, HEAD OF CLINICAL DEVELOPM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1307**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. O'NEILL, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 170  
 City Vineburg State CA Zip Code 95487  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, PHARMACOLOGICAL SCIENCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1308**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. PALLANSCH, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 668  
 City LOPEZ ISLAND State WA Zip Code 98261  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, MEDICAL AFFAIRS  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1309**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	160.00
<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 18 OF 29
<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)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. SIMPSON, CAMILLA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 770 LINDARO ST.  
 City San Rafael State CA Zip Code 94901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) GVP GLOBAL REGULATORY AFFAIRS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1310**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. SLUZKY, VICTORIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29 MADERA DEL PRESIDIO DRIVE  
 City Corte Madera State CA Zip Code 94925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) GVP, QUALITY AND PROCESS DEVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1311**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. SPIEGELMAN, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 STANFORD AVE  
 City Palo Alto State CA Zip Code 94306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) EXECUTIVE VICE PRESIDENT, CHIEF  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1312**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<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 19 OF 29
<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)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. TENEROWICZ, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Magee Court  
 City Moraga State CA Zip Code 94556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BioMarin Occupation (for Individual) VP, Supply Chain and Logistics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 16 / 2016  
**Transaction ID : INCA1313**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. BARNES, LESLIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4149 CASPER WAY  
 City NAPA State CA Zip Code 94558  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, DEVELOPMENT SCIENCES OPE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1326**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

**C. BIENAIME, JEAN JACQUES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2510 SKYFARM DR  
 City Hillsborough State CA Zip Code 94010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3840.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1327**  
 Amount of Each Receipt this Period 192.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	312.00
<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 20 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. BLUM, ARTHUR, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 FAIRVIEW AVE  
 City Cortes Madera State CA Zip Code 94925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VICE PRESIDENT, REGULATORY  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1350.00**

Date of Receipt **09 / 30 / 2016**  
**Transaction ID : INCA1328**  
 Amount of Each Receipt this Period **75.00**  
 Memo Item

**B. CLARKE, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 ILLINOIS STREET #210  
 City San Francisco State CA Zip Code 94107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) SVP, PRODUCT DEVELOPMENT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2146.84**

Date of Receipt **09 / 30 / 2016**  
**Transaction ID : INCA1329**  
 Amount of Each Receipt this Period **115.00**  
 Memo Item

**C. DAVIS, G. ERIC, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 490 SONOMA MOUNTAIN RD  
 City Petaluma State CA Zip Code 94954  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) SVP, GENERAL COUNSEL  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **3846.03**

Date of Receipt **09 / 30 / 2016**  
**Transaction ID : INCA1330**  
 Amount of Each Receipt this Period **192.30**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>382.30</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: (check only one)	PAGE 21 OF 29
<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)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. ESCANDON, RAFAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 43 EDINBURGH ST.  
 City SAN FRANCISCO State CA Zip Code 94112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, DEVELOPMENT SCIENCES OPEF  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1331**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. FOUTS, ERIK T., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 BLACK OAK LANE  
 City Novato State CA Zip Code 94947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, MANUFACTURING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1510.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1332**  
 Amount of Each Receipt this Period 80.00  
 Memo Item

**C. FUCHS, HENRY J., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 57 AVILA STREET  
 City SAN FRANCISCO State CA Zip Code 94123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) EVP, CHIEF MEDICAL OFFICER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1333**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	330.00
<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 22 OF 29
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. GOLD, DANIEL S., , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3223 SANTIAGO STREET

City SAN FRANCISCO	State CA	Zip Code 94116
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) BIOMARIN	Occupation (for Individual) VP, PROCESS SCIENCES
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

**Transaction ID : INCA1334**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. GRASS, JOSHUA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 196 CASTLE HILL RANCH ROAD

City WALNUT CREEK	State CA	Zip Code 94595
----------------------	-------------	-------------------

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

Name of Employer (for Individual) BIOMARIN	Occupation (for Individual) SVP, BUSINESS & CORPORATE DEV
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

**Transaction ID : INCA1335**

Amount of Each Receipt this Period  
75.00

Memo Item

**C. HITCHNER, KENNETH, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 777 BUENA VISTA ST

City Moss Beach	State CA	Zip Code 94038
--------------------	-------------	-------------------

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

Name of Employer (for Individual) BIOMARIN	Occupation (for Individual) VP, DEVELOPMENT
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

**Transaction ID : INCA1336**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<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 23 OF 29
<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)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. LO SCALZO, PHILIP, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 448 IGNACIO BLVD., #346  
 City Novato State CA Zip Code 94949  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) SVP, CORPORATE COMPLIANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1337**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. MUELLER, BRIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 OLIVE  
 City Larkspur State CA Zip Code 94939  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) GVP, CONTROLLER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1338**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. NOONBERG, SARAH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 DIGITAL DRIVE  
 City NOVATO State CA Zip Code 94707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) GVP, HEAD OF CLINICAL DEVELOPM  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 640.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1339**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	180.00
<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 24 OF 29
<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)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. O'NEILL, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 170  
 City Vineburg State CA Zip Code 95487  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, PHARMACOLOGICAL SCIENCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1340**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. PALLANSCH, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 668  
 City LOPEZ ISLAND State WA Zip Code 98261  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) VP, MEDICAL AFFAIRS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1341**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. SIMPSON, CAMILLA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 770 LINDARO ST.  
 City San Rafael State CA Zip Code 94901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) GVP GLOBAL REGULATORY AFFAIRS  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1342**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	170.00
<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 25 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

**A. SLUZKY, VICTORIA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 29 MADERA DEL PRESIDIO DRIVE  
 City Corte Madera State CA Zip Code 94925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) GVP, QUALITY AND PROCESS DEVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1425.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1343**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. SPIEGELMAN, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 STANFORD AVE  
 City Palo Alto State CA Zip Code 94306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BIOMARIN Occupation (for Individual) EXECUTIVE VICE PRESIDENT, CHIE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1344**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. TENEROWICZ, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Magee Court  
 City Moraga State CA Zip Code 94556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BioMarin Occupation (for Individual) VP, Supply Chain and Logistics  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : INCA1345**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<b>TOTAL</b> This Period (last page this line number only).....	4947.90

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

Full Name (Last, First, Middle Initial)

**A. BRADY FOR CONGRESS**

Mailing Address PO BOX 8277

City  
The Woodlands

State  
TX

Zip Code  
77387

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**BRADY, KEVIN, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TX District: 08

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2016

FEC Identification Number

C C00311043

**Transaction ID : EXPB1319**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CROWLEY FOR CONGRESS**

Mailing Address 84-56 GRAND AVENUE

City  
ELMHURST

State  
NY

Zip Code  
11373

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**CROWLEY, JOSEPH, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NY District: 14

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2016

FEC Identification Number

C C00338954

**Transaction ID : EXPB1322**

Amount of Each Disbursement this Period

1400.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. DEVIN NUNES CAMPAIGN COMMITTEE**

Mailing Address PO BOX 6545

City  
VISALIA

State  
CA

Zip Code  
93290

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**NUNES, DEVIN G., , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 22

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2016

FEC Identification Number

C C00370056

**Transaction ID : EXPB1315**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

6400.00

**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 checked="" type="checkbox"/> 23	<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)

**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF ERIK PAULSEN**

Mailing Address P.O. BOX 44369

City  
Eden Prairie

State  
MN

Zip Code  
55344

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**PAULSEN, ERIK, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

**C** C00439661

**Transaction ID : EXPB1316**

Amount of Each Disbursement this Period

500.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**B. GEORGIANS FOR ISAKSON**

Mailing Address POST OFFICE BOX 250116

City  
Atlanta

State  
GA

Zip Code  
30325

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**ISAKSON, JOHN HARDY, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: GA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

**C** C00384693

**Transaction ID : EXPB1324**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. GUTHRIE FOR CONGRESS**

Mailing Address P.O. BOX 9639

City  
BOWLING GREEN

State  
KY

Zip Code  
42102

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**GUTHRIE, BRETT, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: KY District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

**C** C00445023

**Transaction ID : EXPB1323**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

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

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

2500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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)

**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

Full Name (Last, First, Middle Initial)

**A. LANCE FOR CONGRESS**

Mailing Address PO BOX 225

City  
Colonia

State  
NJ

Zip Code  
07067

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**LANCE, LEONARD, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NJ District: 07

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2016

FEC Identification Number

C C00444224

**Transaction ID : EXPB1325**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MICHAEL BURGESS FOR CONGRESS**

Mailing Address PO BOX 2334

City  
DENTON

State  
TX

Zip Code  
76202

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**BURGESS, MICHAEL C., , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TX District: 26

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2016

FEC Identification Number

C C00372532

**Transaction ID : EXPB1320**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE THOMPSON FOR CONGRESS**

Mailing Address 5429 MADISON AVENUE

City  
SACRAMENTO

State  
CA

Zip Code  
95841

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**THOMPSON, MIKE, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 05

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2016

FEC Identification Number

C C00326363

**Transaction ID : EXPB1318**

Amount of Each Disbursement this Period

2700.00

Memo Item

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

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

6700.00

**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 checked="" type="checkbox"/> 23	<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)

**BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC**

Full Name (Last, First, Middle Initial)

**A. SWALWELL FOR CONGRESS**

Mailing Address P.O. BOX 2847

City  
Dublin

State  
CA

Zip Code  
94568

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**SWALWELL, ERIC MICHAEL, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 15

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

FEC Identification Number

**C** C00502294

**Transaction ID : EXPB1317**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE RICHARD BURR COMMITTEE**

Mailing Address PO BOX 5928

City  
Winston-Salem

State  
NC

Zip Code  
27113

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**BURR, RICHARD, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NC District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

FEC Identification Number

**C** C00385526

**Transaction ID : EXPB1321**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

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

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

3500.00

19100.00