



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

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="2012"/>		40145.63
(b) Cash on Hand at Beginning of Reporting Period.....	43422.19	
(c) Total Receipts (from Line 19) .....	5422.00	24219.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	48844.19	64364.63
7. Total Disbursements (from Line 31).....	65.36	15585.80
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	48778.83	48778.83
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

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

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).....	3031.00	7704.00
(ii) Unitemized .....	2391.00	16515.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5422.00	24219.00
(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) .....	5422.00	24219.00
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))..... ▶	5422.00	24219.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5422.00	24219.00

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

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 .....	65.36	3585.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	65.36	3585.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	12000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. 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 .. 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)) ..	65.36	15585.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	65.36	15585.80

**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
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5422.00	24219.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5422.00	24219.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	65.36	3585.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	65.36	3585.80

**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 27
	<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)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

**A. Matthew David Arnold**  
Full Name (Last, First, Middle Initial)

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation VICE PRESIDENT CHIEF OF STAFF

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 13 / 2012  
**Transaction ID : 201204116534-127**

Amount of Each Receipt this Period 75.00

**B. Matthew David Arnold**  
Full Name (Last, First, Middle Initial)

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation VICE PRESIDENT CHIEF OF STAFF

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 27 / 2012  
**Transaction ID : 2012042565251-127**

Amount of Each Receipt this Period 75.00

**C. Joel A. Batten**  
Full Name (Last, First, Middle Initial)

Mailing Address 1809 1st Street North #501

City Jacksonville Beach State FL Zip Code 32250

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

Name of Employer MedImmune Biologics Inc. Occupation MANAGER GOVERNMENT AFFAIRS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 04 / 13 / 2012  
**Transaction ID : 201204116534-83**

Amount of Each Receipt this Period 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 180.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial) <b>A. Joel A. Batten</b>		Date of Receipt MM / DD / YYYY 04 / 27 / 2012 <b>Transaction ID : 2012042565251-83</b>
Mailing Address 412 Turtle Run Ct Unit 501		Amount of Each Receipt this Period 30.00
City Ponte Vedra Beach	State FL	Zip Code 32082
FEC ID number of contributing federal political committee. C		
Name of Employer MedImmune Biologics Inc.	Occupation MANAGER GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) <b>B. William C. Bertrand</b>		Date of Receipt MM / DD / YYYY 04 / 13 / 2012 <b>Transaction ID : 201204116534-24</b>
Mailing Address One MedImmune Way		Amount of Each Receipt this Period 150.00
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		
Name of Employer MedImmune LLC	Occupation EXECUTIVE VICE PRESIDENT GEN. COUNS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

Full Name (Last, First, Middle Initial) <b>C. William C. Bertrand</b>		Date of Receipt MM / DD / YYYY 04 / 27 / 2012 <b>Transaction ID : 2012042565251-24</b>
Mailing Address One MedImmune Way		Amount of Each Receipt this Period 150.00
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		
Name of Employer MedImmune LLC	Occupation EXECUTIVE VICE PRESIDENT GEN. COUNS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

<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 8 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial) <b>A. David Kemp Boyd</b>		Date of Receipt
Mailing Address 3890 Campus Drive		M M M / D D D / Y Y Y Y Y Y 04 / 27 / 2012
City Thousand Oaks	State CA	Zip Code 91360
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 2012042565251-35</b>
Name of Employer MedImmune Biologics Inc.		Amount of Each Receipt this Period
Occupation REGIONAL BUSINESS DIRECTOR		25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. John J. Brack</b>		Date of Receipt
Mailing Address One MedImmune Way		M M M / D D D / Y Y Y Y Y Y 04 / 27 / 2012
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 2012042565251-67</b>
Name of Employer MedImmune LLC		Amount of Each Receipt this Period
Occupation VICE PRESIDENT HUMAN RESOURCES		25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C. Christopher M. Brooke</b>		Date of Receipt
Mailing Address One MedImmune Way		M M M / D D D / Y Y Y Y Y Y 04 / 13 / 2012
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 201204116534-108</b>
Name of Employer MedImmune Biologics Inc.		Amount of Each Receipt this Period
Occupation VICE PRESIDENT SALES		50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<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 9 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

**A. Christopher M. Brooke**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One MedImmune Way  
 City Gaithersburg State MD Zip Code 20878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune Biologics Inc. Occupation VICE PRESIDENT SALES  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **450.00**

Date of Receipt **04 / 27 / 2012**  
**Transaction ID : 2012042565251-108**  
 Amount of Each Receipt this Period **50.00**

**B. Elizabeth Brunsvold**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 340 West Old Town Court  
 City Chicago State IL Zip Code 60610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune Biologics Inc. Occupation MANAGER GOVERNMENT AFFAIRS  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **450.00**

Date of Receipt **04 / 13 / 2012**  
**Transaction ID : 201204116534-111**  
 Amount of Each Receipt this Period **50.00**

**C. Elizabeth Brunsvold**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 340 West Old Town Court  
 City Chicago State IL Zip Code 60610  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune Biologics Inc. Occupation MANAGER GOVERNMENT AFFAIRS  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **450.00**

Date of Receipt **04 / 27 / 2012**  
**Transaction ID : 2012042565251-111**  
 Amount of Each Receipt this Period **50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>150.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial) <b>A. Lauren Randall Buckley</b>		Date of Receipt MM / DD / YYYY 04 / 13 / 2012 <b>Transaction ID : 201204116534-126</b>
Mailing Address One MedImmune Way		Amount of Each Receipt this Period 50.00
City Gaithersburg	State MD Zip Code 20878	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
Name of Employer MedImmune Biologics Inc.	Occupation ASSOCIATE DIRECTOR FEDERAL GOVT AF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>B. Lauren Randall Buckley</b>		Date of Receipt MM / DD / YYYY 04 / 27 / 2012 <b>Transaction ID : 2012042565251-126</b>
Mailing Address One MedImmune Way		Amount of Each Receipt this Period 50.00
City Gaithersburg	State MD Zip Code 20878	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
Name of Employer MedImmune Biologics Inc.	Occupation ASSOCIATE DIRECTOR FEDERAL GOVT AF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C. Glenn N. Byrd</b>		Date of Receipt MM / DD / YYYY 04 / 13 / 2012 <b>Transaction ID : 201204116534-103</b>
Mailing Address One MedImmune Way		Amount of Each Receipt this Period 50.00
City Gaithersburg	State MD Zip Code 20878	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
Name of Employer MedImmune LLC	Occupation SENIOR DIRECTOR REGULATORY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<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 11 OF 27
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

**A. Glenn N. Byrd**  
Full Name (Last, First, Middle Initial)

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR REGULATORY AFFAIRS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **04 / 27 / 2012**

**Transaction ID : 2012042565251-103**

Amount of Each Receipt this Period **50.00**

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

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR GXP SOURCING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **04 / 13 / 2012**

**Transaction ID : 201204116534-116**

Amount of Each Receipt this Period **30.00**

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

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR GXP SOURCING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt **04 / 27 / 2012**

**Transaction ID : 2012042565251-116**

Amount of Each Receipt this Period **30.00**

**SUBTOTAL** of Receipts This Page (optional)..... **110.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

**A. Salvatore Constantino**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One MedImmune Way  
 City Gaithersburg State MD Zip Code 20878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune LLC Occupation DIRECTOR MARKETED PRODUCT PR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 13 / 2012  
**Transaction ID : 201204116534-96**  
 Amount of Each Receipt this Period  
 50.00

**B. Salvatore Constantino**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One MedImmune Way  
 City Gaithersburg State MD Zip Code 20878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune LLC Occupation DIRECTOR MARKETED PRODUCT PR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 27 / 2012  
**Transaction ID : 2012042565251-96**  
 Amount of Each Receipt this Period  
 50.00

**C. Lisa R. Davis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One MedImmune Way  
 City Gaithersburg State MD Zip Code 20878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune LLC Occupation VICE PRESIDENT CORPORATE AFFAIRS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 13 / 2012  
**Transaction ID : 201204116534-121**  
 Amount of Each Receipt this Period  
 80.00

<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 13 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial) <b>A. Lisa R. Davis</b>		Date of Receipt MM / DD / YYYY 04 / 27 / 2012 <b>Transaction ID : 2012042565251-121</b>
Mailing Address One MedImmune Way		Amount of Each Receipt this Period 80.00
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		
Name of Employer MedImmune LLC	Occupation VICE PRESIDENT CORPORATE AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

Full Name (Last, First, Middle Initial) <b>B. Matthew M. Donley</b>		Date of Receipt MM / DD / YYYY 04 / 27 / 2012 <b>Transaction ID : 2012042565251-13</b>
Mailing Address One MedImmune Way		Amount of Each Receipt this Period 25.00
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		
Name of Employer MedImmune LLC	Occupation EXECUTIVE VICE PRESIDENT HUMAN RES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C. Stephanie Lynn Duatschek</b>		Date of Receipt MM / DD / YYYY 04 / 13 / 2012 <b>Transaction ID : 201204116534-36</b>
Mailing Address One MedImmune Way		Amount of Each Receipt this Period 75.00
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		
Name of Employer MedImmune Biologics Inc.	Occupation VICE PRESIDENT COMMERCIAL OPERATIC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.00	

<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 14 OF 27
	<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"/>	<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)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

**A. Stephanie Lynn Duatschek**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One MedImmune Way  
 City Gaithersburg State MD Zip Code 20878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune Biologics Inc. Occupation VICE PRESIDENT COMMERCIAL OPERATIC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 27 / 2012  
**Transaction ID : 2012042565251-36**  
 Amount of Each Receipt this Period  
 75.00

**B. Courtney McKinnon Elliott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 271 Yachting Road  
 City Lexington State SC Zip Code 29072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune Biologics Inc. Occupation DIRECTOR STATE GOVERNMENT AFFAIRS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 13 / 2012  
**Transaction ID : 201204116534-42**  
 Amount of Each Receipt this Period  
 40.00

**C. Courtney McKinnon Elliott**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 271 Yachting Road  
 City Lexington State SC Zip Code 29072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune Biologics Inc. Occupation DIRECTOR STATE GOVERNMENT AFFAIRS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 27 / 2012  
**Transaction ID : 2012042565251-42**  
 Amount of Each Receipt this Period  
 40.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	155.00
<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 15 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial) <b>A. Peter S. Greenleaf</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>04</td> <td>/</td> <td>13</td> <td>/</td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	04	/	13	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y								
04	/	13	/	2012								
Mailing Address One MedImmune Way		<b>Transaction ID : 201204116534-86</b>										
City Gaithersburg	State MD	Zip Code 20878										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00										
Name of Employer MedImmune LLC	Occupation PRESIDENT											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00											

Full Name (Last, First, Middle Initial) <b>B. Peter S. Greenleaf</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>04</td> <td>/</td> <td>27</td> <td>/</td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	04	/	27	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y								
04	/	27	/	2012								
Mailing Address One MedImmune Way		<b>Transaction ID : 2012042565251-86</b>										
City Gaithersburg	State MD	Zip Code 20878										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00										
Name of Employer MedImmune LLC	Occupation PRESIDENT											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00											

Full Name (Last, First, Middle Initial) <b>C. Jason M. Hall</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>04</td> <td>/</td> <td>27</td> <td>/</td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	04	/	27	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y								
04	/	27	/	2012								
Mailing Address One MedImmune Way		<b>Transaction ID : 2012042565251-59</b>										
City Gaithersburg	State MD	Zip Code 20878										
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00										
Name of Employer MedImmune Biologics Inc.	Occupation SENIOR DIRECTOR REVENUE CYCLE MAN											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00											

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<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 27
	<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)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial) <b>A. Randolph R. Hall</b>		Date of Receipt
Mailing Address One MedImmune Way		M M M / D D D / Y Y Y Y Y Y 04 / 13 / 2012
City	State	Zip Code
Gaithersburg	MD	20878
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 201204116534-22</b>
Name of Employer MedImmune Biologics Inc.		Amount of Each Receipt this Period
Occupation VICE PRESIDENT FIELD AND MSA OPERAT		70.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	630.00	

Full Name (Last, First, Middle Initial) <b>B. Randolph R. Hall</b>		Date of Receipt
Mailing Address One MedImmune Way		M M M / D D D / Y Y Y Y Y Y 04 / 27 / 2012
City	State	Zip Code
Gaithersburg	MD	20878
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2012042565251-22</b>
Name of Employer MedImmune Biologics Inc.		Amount of Each Receipt this Period
Occupation VICE PRESIDENT FIELD AND MSA OPERAT		70.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	630.00	

Full Name (Last, First, Middle Initial) <b>C. Amy Hamerton</b>		Date of Receipt
Mailing Address 152 Dulverton Cir		M M M / D D D / Y Y Y Y Y Y 04 / 27 / 2012
City	State	Zip Code
Folsom	CA	95630
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2012042565251-101</b>
Name of Employer MedImmune Biologics Inc.		Amount of Each Receipt this Period
Occupation MANAGER GOVERNMENT AFFAIRS		25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	225.00	

<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 27
	<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)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial) <b>A. Stephen J. Hastings</b>			Date of Receipt
Mailing Address 5214 Parkland Ave			<input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 201204116534-120</b>
Dallas	TX	75235	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
MedImmune Biologics Inc.	MANAGER GOVERNMENT AFFAIRS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Stephen J. Hastings</b>			Date of Receipt
Mailing Address 5214 Parkland Ave			<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 2012042565251-120</b>
Dallas	TX	75235	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="50.00"/>
Name of Employer	Occupation		
MedImmune Biologics Inc.	MANAGER GOVERNMENT AFFAIRS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Mark G. Hitz</b>			Date of Receipt
Mailing Address 3012 Mahan Court			<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2012"/>
City	State	Zip Code	<b>Transaction ID : 2012042565251-7</b>
Grapevine	TX	76051	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
MedImmune Biologics Inc.	NATIONAL SALES DIRECTOR		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="125.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 27
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial) <b>A. John T. Hockmeyer</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 27 / 2012 <b>Transaction ID : 2012042565251-29</b>
Mailing Address One MedImmune Way		Amount of Each Receipt this Period 25.00
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		
Name of Employer MedImmune LLC	Occupation SENIOR DIRECTOR OPERATIONS STRAGE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B. Bahija Jallal</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2012 <b>Transaction ID : 201204116534-66</b>
Mailing Address One MedImmune Way		Amount of Each Receipt this Period 100.00
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		
Name of Employer MedImmune LLC	Occupation EXECUTIVE VICE PRESIDENT RESEARCH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) <b>C. Bahija Jallal</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 27 / 2012 <b>Transaction ID : 2012042565251-66</b>
Mailing Address One MedImmune Way		Amount of Each Receipt this Period 100.00
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		
Name of Employer MedImmune LLC	Occupation EXECUTIVE VICE PRESIDENT RESEARCH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	225.00
<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 27
	<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)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial) <b>A. Anne Marie Licos</b>		Date of Receipt
Mailing Address 8825 Montagna Dr		M M M / D D D / Y Y Y Y Y Y 04 / 27 / 2012
City	State	Zip Code
Las Vegas	NV	89134
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2012042565251-106</b>
Name of Employer MedImmune Biologics Inc.		Amount of Each Receipt this Period
Occupation DIRECTOR MEDICAL SCIENCES - MGD MK		25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	225.00	

Full Name (Last, First, Middle Initial) <b>B. William E. McMurray</b>		Date of Receipt
Mailing Address One MedImmune Way		M M M / D D D / Y Y Y Y Y Y 04 / 27 / 2012
City	State	Zip Code
Gaithersburg	MD	20878
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2012042565251-8</b>
Name of Employer MedImmune LLC		Amount of Each Receipt this Period
Occupation SENIOR DIRECTOR FACILITIES		25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	225.00	

Full Name (Last, First, Middle Initial) <b>C. Michael M. Miller</b>		Date of Receipt
Mailing Address 10 Telfair Ct		M M M / D D D / Y Y Y Y Y Y 04 / 27 / 2012
City	State	Zip Code
Columbia	SC	29212
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2012042565251-6</b>
Name of Employer MedImmune Biologics Inc.		Amount of Each Receipt this Period
Occupation NATIONAL SALES DIRECTOR VACCINES		25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 27
	<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)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial) <b>A. Mark A. Mlynarczyk</b>			Date of Receipt
Mailing Address One MedImmune Way			M M M / D D D / Y Y Y Y Y Y 04 / 13 / 2012
City	State	Zip Code	<b>Transaction ID : 201204116534-26</b>
Gaithersburg	MD	20878	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer	Occupation		
MedImmune LLC	EXECUTIVE EXTERNAL AFFAIRS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	450.00		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mark A. Mlynarczyk</b>			Date of Receipt
Mailing Address One MedImmune Way			M M M / D D D / Y Y Y Y Y Y 04 / 27 / 2012
City	State	Zip Code	<b>Transaction ID : 2012042565251-26</b>
Gaithersburg	MD	20878	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer	Occupation		
MedImmune LLC	EXECUTIVE EXTERNAL AFFAIRS		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	450.00		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Raken B. Modi</b>			Date of Receipt
Mailing Address One MedImmune Way			M M M / D D D / Y Y Y Y Y Y 04 / 13 / 2012
City	State	Zip Code	<b>Transaction ID : 201204116534-105</b>
Gaithersburg	MD	20878	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer	Occupation		
MedImmune LLC	SENIOR DIRECTOR CORPORATE STRATEG		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	450.00		
<input type="checkbox"/> Other (specify) ▼			

<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 21 OF 27
	<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)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial) <b>A. Raken B. Modi</b>		Date of Receipt
Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2012"/>
City	State	Zip Code
Gaithersburg	MD	20878
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2012042565251-105</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
MedImmune LLC	SENIOR DIRECTOR CORPORATE STRATEG	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Deborah A. Neivert</b>		Date of Receipt
Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="13"/> / <input type="text" value="2012"/>
City	State	Zip Code
Gaithersburg	MD	20878
FEC ID number of contributing federal political committee.		<b>Transaction ID : 201204116534-58</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="33.00"/>
Name of Employer	Occupation	
MedImmune Biologics Inc.	SENIOR DIRECTOR GLOBAL STRAT. MKTG	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="297.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Deborah A. Neivert</b>		Date of Receipt
Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2012"/>
City	State	Zip Code
Gaithersburg	MD	20878
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2012042565251-58</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="33.00"/>
Name of Employer	Occupation	
MedImmune Biologics Inc.	SENIOR DIRECTOR GLOBAL STRAT. MKTG	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="297.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="116.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 27
	<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)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

**A. Paul E. Nielsen**  
Full Name (Last, First, Middle Initial)

Mailing Address 15104 NE 209th Place

City State Zip Code  
Brush Prairie WA 98606

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

Name of Employer Occupation  
MedImmune Biologics Inc. SENIOR MANAGER GOVERNMENT AFFAIR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 27 / 2012  
**Transaction ID : 2012042565251-33**

Amount of Each Receipt this Period  
25.00

**B. Russell L. Palk**  
Full Name (Last, First, Middle Initial)

Mailing Address 1105 David Dr.

City State Zip Code  
Franklin TN 37069

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

Name of Employer Occupation  
MedImmune Biologics Inc. MANAGER GOVERNMENT AFFAIRS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 13 / 2012  
**Transaction ID : 201204116534-97**

Amount of Each Receipt this Period  
30.00

**C. Russell L. Palk**  
Full Name (Last, First, Middle Initial)

Mailing Address 1105 David Dr.

City State Zip Code  
Franklin TN 37069

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

Name of Employer Occupation  
MedImmune Biologics Inc. MANAGER GOVERNMENT AFFAIRS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 27 / 2012  
**Transaction ID : 2012042565251-97**

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 85.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 27
	<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)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

**A. Abigail A. Parta Gossman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1430 Wilson Court  
 City South St. Paul State MN Zip Code 55075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune Biologics Inc. Occupation SENIOR MANAGER GOVERNMENT AFFAIR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 04 / 27 / 2012  
**Transaction ID : 2012042565251-44**  
 Amount of Each Receipt this Period  
 25.00

**B. Steve G. Richards**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1928 Sunset Harbor Drive  
 City Miami Beach State FL Zip Code 33139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune Biologics Inc. Occupation ASSOCIATE DIRECTOR PUBLIC HEALTH  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 04 / 27 / 2012  
**Transaction ID : 2012042565251-94**  
 Amount of Each Receipt this Period  
 25.00

**C. Julie A. Sharp**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 319 North Bernardo Avenue  
 City Mountain View State CA Zip Code 94043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune LLC Occupation ASSOCIATE DIRECTOR CLINICAL PLANNIN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt  
 04 / 13 / 2012  
**Transaction ID : 201204116534-68**  
 Amount of Each Receipt this Period  
 45.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	95.00
<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 27
	<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)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial) <b>A. Julie A. Sharp</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>04</td> <td>/</td> <td>27</td> <td>/</td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	04	/	27	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y								
04	/	27	/	2012								
Mailing Address 319 North Bernardo Avenue		<b>Transaction ID : 2012042565251-68</b>										
City Mountain View	State CA	Zip Code 94043										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 45.00										
Name of Employer MedImmune LLC	Occupation ASSOCIATE DIRECTOR CLINICAL PLANNIN											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 405.00											

Full Name (Last, First, Middle Initial) <b>B. Andrew D. Skibo</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>04</td> <td>/</td> <td>13</td> <td>/</td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	04	/	13	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y								
04	/	13	/	2012								
Mailing Address One MedImmune Way		<b>Transaction ID : 201204116534-102</b>										
City Gaithersburg	State MD	Zip Code 20878										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00										
Name of Employer MedImmune LLC	Occupation EXECUTIVE VICE PRESIDENT OPERATION											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00											

Full Name (Last, First, Middle Initial) <b>C. Andrew D. Skibo</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>04</td> <td>/</td> <td>27</td> <td>/</td> <td>2012</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	04	/	27	/	2012
M M M	/	D D D	/	Y Y Y Y Y Y								
04	/	27	/	2012								
Mailing Address One MedImmune Way		<b>Transaction ID : 2012042565251-102</b>										
City Gaithersburg	State MD	Zip Code 20878										
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00										
Name of Employer MedImmune LLC	Occupation EXECUTIVE VICE PRESIDENT OPERATION											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00											

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<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 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

**A. Nick B. Tressler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One MedImmune Way  
 City Gaithersburg State MD Zip Code 20878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR BST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 13 / 2012  
**Transaction ID : 201204116534-34**  
 Amount of Each Receipt this Period  
 30.00

**B. Nick B. Tressler**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One MedImmune Way  
 City Gaithersburg State MD Zip Code 20878  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR BST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 27 / 2012  
**Transaction ID : 2012042565251-34**  
 Amount of Each Receipt this Period  
 30.00

**C. Michael P. Walsh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45 Wildwood Street  
 City Winchester State MA Zip Code 01890  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MedImmune Biologics Inc. Occupation ADVOCACY DEVELOPMENT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 27 / 2012  
**Transaction ID : 2012042565251-88**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 85.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial) <b>A. Jenell H. Weaver</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>04</td> <td>/</td> <td>27</td> <td>/</td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	04	/	27	/	2012
M M	/	D D	/	Y Y Y Y								
04	/	27	/	2012								
Mailing Address 14450 Twin Oaks Dr		<b>Transaction ID : 2012042565251-21</b>										
City Carmel State IN Zip Code 46032	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 25.00										
Name of Employer MedImmune Biologics Inc. Occupation SENIOR MANAGER NATIONAL ACCOUNTS	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00										

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td>/</td> <td></td> <td>/</td> <td></td> </tr> </table>	M M	/	D D	/	Y Y Y Y		/		/	
M M	/	D D	/	Y Y Y Y								
	/		/									
Mailing Address		Amount of Each Receipt this Period										
City State Zip Code	FEC ID number of contributing federal political committee. <b>C</b>											
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼										

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td>/</td> <td></td> <td>/</td> <td></td> </tr> </table>	M M	/	D D	/	Y Y Y Y		/		/	
M M	/	D D	/	Y Y Y Y								
	/		/									
Mailing Address		Amount of Each Receipt this Period										
City State Zip Code	FEC ID number of contributing federal political committee. <b>C</b>											
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼										

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3031.00

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 1111 E. Main Street  
PO Box 27025

City Richmond State VA Zip Code 23219

Purpose of Disbursement  
Bank Service Charge

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 112C03BEF896D33EB66**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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