12/02/2010 13:46

FEC FORM 3X

COMMITTEE (in full)

ADDRESS (number and street)

Check if different than previously

reported. (ACC)

C00407460

TYPE OF REPORT

(a) Quarterly Reports:

April 15

July 15

(TER)

Covering Period

Signature of Treasurer

Office

Use

Only

Type or Print Name of Treasurer

October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE)

July 31 Mid-Year

Report(Non-election Year Only) (MY)

Termination Report

10

Quarterly Report(Q1)

Quarterly Report(Q2)

(Choose One)

FEC IDENTIFICATION NUMBER

Millennium Pharmaceuticals Inc. PAC

1. NAME OF

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only **USE FEC MAILING LABEL** Example:If typing, type OR TYPE OR PRINT ₩ over the lines 750 Ninth Street, NW Suite 575 Washington DC 20001 **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** Х REPORT OR (N) (A) (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) 12-Day (c) Primary (12P) General (12G) Runoff (12R) PRE-Election Report for the: Convention (12C) Special (12S) in the Election on State of (d) 30-Day Х Runoff (30R) Special (30S) Post -Election General (30G) Report for the: in the 02 2010 0 11 Election on State of 0 1 2010 22 2010 11 through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Liz Lewis Electronically Filed by Liz Lewis 12 02 2010 Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. **FEC FORM 3X**

(Rev. 12/2004)

FE6AN026

 $\textbf{A.} \hspace{0.2cm} \textbf{Form/Schedule}: \hspace{0.2cm} \textbf{F3X}$

Transaction ID:

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

3 / 34

FEC Form 3X (Rev. 02/2003)

| Write or | I ype C | ommittee Name | | |
|----------|---------|-----------------|------|-----|
| Miller | าnium | Pharmaceuticals | Inc. | PAC |

| F | Report Covering the Period: From: | 01 2010 | To: D D D Y Y Y Y Y Y Y 2 2 1 0 |
|-----|---|-------------------------|---------------------------------|
| | | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
| 6. | (a) Cash on Hand January 1 2010 Y Y Y | | 15779.50 |
| | (b) Cash on Hand at Begining of Reporting Period | 22363.50 | |
| | (c) Total Receipts (from Line 19) | 3471.50 | 24555.50 |
| | (d) Subtotal (add lines 6(b) and | | |
| | 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 25835.00 | 40335.00 |
| 7. | Total Disbursements (from Line 31) | 0.00 | 14500.00 |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 25835.00 | 25835.00 |
| 9. | Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. | Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

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

For further information contact:

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

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

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 4 / 34

Write or Type Committee Name

Millennium Pharmaceuticals Inc. PAC

Report Covering the Period:

From:

м м 1 0 D D D 1

Y Y W Y 2010

то.

м°м 1 1 D D 22

Y Y Y Y 2 0 1 0

| I. Receipts | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|----------------|---|-------------------------------|-----------------------------------|
| | ontributions (other than loans) From: | | |
| (a) | | | |
| | Than Political Committees (i) Itemized (use Schedule A) | 2965.00 | 15115.00 |
| | | 506.50 | 9440.50 |
| | (ii) Unitemized | | Q.1.0.00 |
| | (iii) TOTAL (add Lines 11(a)(i) and (ii) | 3471.50 | 24555.50 |
| (b) | Political Party Committees | 0.00 | 0.00 |
| (c) | | | |
| | (such as PACs) | 0.00 | 0.00 |
| (d) | Total Contributions (add Lines | | |
| | 11(a)(iii),(b) and (c)) (Carry | 3471.50 | 24555.50 |
| | Totals to Line 33, page 5) | | |
| | ansfers From Affiliated/Other | 0.00 | 0.00 |
| 1 6 | ity dominiteds | | |
| B. All | Loans Received | 0.00 | 0.00 |
| | | 0.00 | 0.00 |
| I. Lo 5. Of | an Repayments Receivedfsets To Operating Expenditures | | 0.00 |
| | efunds, Rebates, etc.) | 0.00 | 0.00 |
| | arry Totals to Line 37, page 5) | 0.00 | 0.00 |
| | Federal candidates and Other | | |
| | litical Committees | 0.00 | 0.00 |
| | her Federal Receipts | | |
| | ividends, Interest, etc.) | 0.00 | 0.00 |
| . Tra | ansfers from Non-Federal and Levin Funds | | |
| (a) | Non-Federal Account | 0.00 | 0.00 |
| | (from Schedule H3) | 0.00 | 0.00 |
| (b) | Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (=) | , | 0.00 | 0.00 |
| (c) | Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| | tal Receipts (add Lines 11(d), | 0.474.50 | 04555 50 |
| 12 | , 13, 14, 15, 16, 17, and 18(c)) | 3471.50 | 24555.50 |
| | al Federal Receipts | 3471.50 | 24555 50 |
| (su | btract Line 18(c) from Line 19) | 3471.50 | 24555.50 |

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

5/34

| | II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|-----|---|-------------------------------|-----------------------------------|
| 21. | Operating Expenditures: (a) Shared Federal/Non-Federal | | |
| | Activity (from Schedule H4) | 0.00 | 0.00 |
| | () | 0.00 | 0.00 |
| | (ii) Non-Federal Share(b) Other Federal Operating | 0.00 | 0.00 |
| | Expenditures | 0.00 | 0.00 |
| | (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) | 0.00 | 0.00 |
| 2. | Transfers to Affiliated/Other Party | | |
| 3 | Contributions to | 0.00 | 0.00 |
| | Federal Candidates/Committeesand Other Political Committees | 0.00 | 14500.00 |
| | Independent Expenditure (use Schedule E) | 0.00 | 0.00 |
| 5. | Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0.00 | 0.00 |
| 6. | Loan Repayments Made | 0.00 | 0.00 |
| 7 | Loans Made | 0.00 | 0.00 |
| 8. | 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 |
| 9. | Other Disbursements | 0.00 | 0.00 |
| 0. | Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity | | |
| | (from Schedule H6) | 0.00 | 0.00 |
| | (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 |
| 1. | Total Disbursements (add Lines 21(c), 22, | | |
| | 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 0.00 | 14500.00 |
| 2. | Total Federal Disbursements | | |
| | (subtract Line 21(a)(ii) and Line 30(a)(ii) | 0.00 | 14500.00 |
| | from Line 31) | 0.00 | 14500.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 6 / 34

| | 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) | 3471.50 | 24555.50 |
| 34. | Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. | Net Contributions (other than loans) (subtract Line 34 from Line 33) | 3471.50 | 24555.50 |
| 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 |

FE6AN026

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 7/34 (check only one) X 11a 11b 11c 12 12 13 14 15 16 17 |
|---|--|--|
| Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. P | nd Statements may not be sold or used by any person the name and address of any political committee to s | for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) John Billias Mailing Address 130 Sankernando L City E. Amherst FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General | State Zip Code NY 14051 C Occupation Health Systems Manager Aggregate Year-to-Date 525.00 | Date of Receipt M M J J J J J J J J J J J J J J J J J |
| Full Name (Last, First, Middle Initial) John Billias Mailing Address 130 Sankernando L City E. Amherst FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Primary General Other (specify) Full Name (Last, First, Middle Initial) John Billias Mailing Address 130 Sankernando L City E. Amherst FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. | State Zip Code NY 14051 C Occupation Health Systems Manager | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional) | Aggregate Year-to-Date ▼ 525.00 | 75.00 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 8 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|--|---|---|
| Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. P. | d Statements may not be sold or used by any perso the name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Kelly Bodiford Mailing Address 710 Conesus Lane City Winter Springs FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General | State Zip Code FL 32708 C Occupation Sr. Oncology Sales Specialist Aggregate Year-to-Date ▼ 525.00 | Date of Receipt M M M / D D / Y Y Y Y Y 1 0 1 5 20101129125559-46 Amount of Each Receipt this Period 25.00 |
| Full Name (Last, First, Middle Initial) Kelly Bodiford Mailing Address 710 Conesus Lane City Winter Springs FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General | State Zip Code FL 32708 C Occupation Sr. Oncology Sales Specialist Aggregate Year-to-Date 525.00 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Name (Last, First, Middle Initial) Kelly Bodiford Mailing Address 710 Conesus Lane City Winter Springs FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) | State Zip Code FL 32708 C Occupation Sr. Oncology Sales Specialist Aggregate Year-to-Date 525.00 | Date of Receipt M M / D D / Y Y Y Y Y 1 1 5 2 0 1 0 Transaction ID: 20101129125544-45 Amount of Each Receipt this Period 25.00 |
| SUBTOTAL of Receipts This Page (optional | l) > | 75.00 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 9 / 34 (check only one) X 11a |
|---|---|---|
| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PAC | ename and address of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Jennifer Boldizar Mailing Address 3618 Swans Landing [City Land O Lakes | Or State Zip Code FL 34639-4439 | Date of Receipt 10 15 2010 Transaction ID: 20101129125559-9 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) | C Occupation Sr. Oncology Sales Specialist Aggregate Year-to-Date ▼ 525.00 | 25.00 |
| Full Name (Last, First, Middle Initial) Jennifer Boldizar Mailing Address 3618 Swans Landing I City Land O Lakes FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) | Or State Zip Code FL 34639-4439 C Occupation Sr. Oncology Sales Specialist Aggregate Year-to-Date ▼ 525.00 | Date of Receipt M M M / D D / 2010 Transaction ID: 2010112913059-9 Amount of Each Receipt this Period 25.00 |
| Full Name (Last, First, Middle Initial) Jennifer Boldizar Mailing Address 3618 Swans Landing [City Land O Lakes | State Zip Code FL 34639-4439 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: □ Primary □ General □ Other (specify) ▼ | Occupation Sr. Oncology Sales Specialist Aggregate Year-to-Date 525.00 | 25.00 |
| SUBTOTAL of Receipts This Page (optional) | | 75.00 |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 10 / 34 (check only one) X |
|---|---|---|
| Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PA | d Statements may not be sold or used by any perso the name and address of any political committee to | on for the purpose of soliciting contributions |
| Full Name (Last, First, Middle Initial) Kevin Carlin Mailing Address 1909 Craig St | | Date of Receipt |
| City Raleigh FEC ID number of contributing | State Zip Code NC 27608 | Transaction ID: 20101129125559-32 Amount of Each Receipt this Period 105.00 |
| federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) ▼ | Occupation Sales Director Aggregate Year-to-Date 2205.00 | |
| Full Name (Last, First, Middle Initial) Kevin Carlin Mailing Address 1909 Craig St | | Date of Receipt 1 0 3 0 2 0 1 0 |
| City Raleigh FEC ID number of contributing | State Zip Code NC 27608 | Transaction ID: 2010112913059-32 Amount of Each Receipt this Period 105.00 |
| Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) | Occupation Sales Director Aggregate Year-to-Date 2205.00 | |
| Full Name (Last, First, Middle Initial) Kevin Carlin Mailing Address 1909 Craig St | | Date of Receipt |
| City Raleigh FEC ID number of contributing federal political committee. | State Zip Code NC 27608 | Transaction ID: 20101129125544-31 Amount of Each Receipt this Period 105.00 |
| Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) | Occupation Sales Director Aggregate Year-to-Date ▼ 2205.00 | |
| SUBTOTAL of Receipts This Page (optional |) | 315.00 |

| SCHEDULE A ITEMIZED REC | (FEC Form 3X) CEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 11 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|--|--|---|---|
| or for commercial purp | oses, other than using the name a | ts may not be sold or used by any persond address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, Fir Patrick Connelly Mailing Address 2 City Penfield FEC ID number of of federal political com Name of Employer Millennium Pharma Inc. Receipt For: Primary Other (specify | Sta NY contributing mittee. Ceuticals General | ' | Date of Receipt 10 15 20101129125559-27 Amount of Each Receipt this Period 25.00 |
| Full Name (Last, Fin Patrick Connelly Mailing Address 2 City Penfield FEC ID number of of federal political communications and the second se | st, Middle Initial) Oatsfield Cirlce Sta NY contributing | ' | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Name of Employer Millennium Pharma Inc. Receipt For: Primary Other (specify | General Aggi | Upation Manager regate Year-to-Date ▼ 525.00 | |
| Full Name (Last, Fir Patrick Connelly Mailing Address 2 City Penfield FEC ID number of of federal political communications and the second se | Sta NY contributing | <u>.</u> | Date of Receipt M |
| Name of Employer Millennium Pharma Inc. Receipt For: Primary Other (specify | ceuticals Occur Sr. I Aggi | upation Manager regate Year-to-Date ▼ 525.00 | |
| SUBTOTAL of Receip | ots This Page (optional) |) | 75.00 |

| | SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 12 / 34 (check only one) X |
|-----------------|--|--|---|
| A C | ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PAC | tatements may not be sold or used by any personame and address of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| ∠ . . | Full Name (Last, First, Middle Initial) Laura De La Garza Mailing Address P.O. Box 21300 | Chara Zin Onda | Date of Receipt 1 1 |
| | City Bedford | State Zip Code TX 76095 | Transaction ID: 20101129125544-13 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 10.00 |
| | Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) ▼ | Occupation Sr. Oncology Sales Specialist Aggregate Year-to-Date 210.00 | |
| 3. | Full Name (Last, First, Middle Initial) Sandra DiCesare Mailing Address 4 Shelly Ln | | Date of Receipt |
| | City | State Zip Code | Transaction ID: 20101129125559-29 |
| | Westford FEC ID number of contributing federal political committee. | MA 01886-4522 | Amount of Each Receipt this Period 50.00 |
| | Name of Employer Millennium Pharmaceuticals Inc. | Occupation VP Commercial Operations | |
| | Receipt For: Primary General Other (specify) | Aggregate Year-to-Date ▼ 1050.00 | |
| | Full Name (Last, First, Middle Initial) Sandra DiCesare | | Date of Receipt |
| | Mailing Address 4 Shelly Ln | | 10 30 2010 |
| | City | State Zip Code | Transaction ID: 2010112913059-29 |
| | Westford FEC ID number of contributing federal political committee. | MA 01886-4522 | Amount of Each Receipt this Period 50.00 |
| | Name of Employer Millennium Pharmaceuticals Inc. | Occupation VP Commercial Operations | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1050.00 | |
| | SUBTOTAL of Receipts This Page (optional) | ······· | 110.00 |

| | SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 13/34 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---------|---|--|---|
| 4 | or for commercial purposes, other than using the | Statements may not be sold or used by any person e name and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PAC | ; | |
| A. | Full Name (Last, First, Middle Initial) Sandra DiCesare | | Date of Receipt |
| | Mailing Address 4 Shelly Ln | Ohata 7'- Oada | 1 1 1 5 2 0 1 0 |
| | City Westford | State Zip Code MA 01886-4522 | Transaction ID: 20101129125544-28 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 50.00 |
| | Name of Employer Millennium Pharmaceuticals Inc. | Occupation VP Commercial Operations | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1050.00 | |
| — В. | Full Name (Last, First, Middle Initial) Deborah Dunsire | I | Date of Receipt |
| | Mailing Address 8 Highmeadow Rd | | 10 |
| | City | State Zip Code | Transaction ID: 20101129125559-33 |
| | Weston FEC ID number of contributing federal political committee. | MA 02493-1941 | Amount of Each Receipt this Period 200.00 |
| | Name of Employer Millennium Pharmaceuticals Inc. | Occupation President & CEO | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 4200.00 | |
| _ C. | Full Name (Last, First, Middle Initial) Deborah Dunsire | 1 | Date of Receipt |
| | Mailing Address 8 Highmeadow Rd | | M M / D D / Y Y Y Y Y Y 1 1 0 3 0 2 0 1 0 |
| | City | State Zip Code | Transaction ID: 2010112913059-33 |
| | Weston FEC ID number of contributing federal political committee. | MA 02493-1941 | Amount of Each Receipt this Period 200.00 |
| | Name of Employer Millennium Pharmaceuticals Inc. | Occupation President & CEO | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 4200.00 | |
| | SUBTOTAL of Receipts This Page (optional) . | | 450.00 |
| F | TOTAL This Period (last page this line numbe | · | |

| SCHEDULI ITEMIZED | E A (FEC Form 3X) RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 14 / 34 (check only one) X 11a |
|--|---|-------------------------------|---|---|
| or for commercia | copied from such Reports and St. I purposes, other than using the DMMITTEE (In Full) Pharmaceuticals Inc. PAC | atements may name and add | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| | ast, First, Middle Initial) ire | State | Zip Code | Date of Receipt M |
| Weston FEC ID numb federal politica | er of contributing al committee. | MA C | 02493-1941 | Amount of Each Receipt this Period 200.00 |
| Inc. Receipt For: Primary | loyer narmaceuticals General specify) ▼ | Occupation Presiden Aggregate | | |
| Full Name (La Tom Fussaro Mailing Addre | ss, First, Middle Initial) | | | Date of Receipt |
| City Washingtor FEC ID numb federal politica | er of contributing | State DC | Zip Code 20005-2110 | Transaction ID: 20101129125544-19 Amount of Each Receipt this Period 10.00 |
| Name of Emp Millennium Pr Inc. Receipt For: | loyer narmaceuticals | | n vir. Fed Govt Relations • Year-to-Date ▼ 210.00 | |
| Full Name (La James Holmes Mailing Addre | | | | Date of Receipt |
| City Altamont | TAVAIION Way | State NY | Zip Code 12009 | 1 0 1 5 2 0 1 0 Transaction ID: 20101129125559-25 Amount of Each Receipt this Period |
| · | er of contributing al committee. | C | | 20.00 |
| Name of Emp Millennium Ph Inc. Receipt For: | loyer narmaceuticals | | n nger, Sales Training e Year-to-Date ▼ | |
| Primary | General pecify) ▼ | Aggregate | 420.00 | |
| SUBTOTAL of | Receipts This Page (optional) | |) | 230.00 |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 15 / 34 (check only one) X 11a 11b 11c 12 |
|--|------------------------|---|--|
| Any information copied from such Reports and S | Statements may | v not be sold or used by any person | 13 14 15 16 on for the purpose of soliciting contributions |
| or for commercial purposes, other than using the | name and add | dress of any political committee to | solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PAC | | | |
| Full Name (Last, First, Middle Initial) James Holmes | | | Date of Receipt |
| Mailing Address 4 Avallon Way | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 2010112913059-25 |
| Altamont | NY | 12009 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 20.00 |
| Name of Employer Millennium Pharmaceuticals | Occupation | n Iger, Sales Training | |
| Inc. Receipt For: | | Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | .55. 55410 | 420.00 | |
| Full Name (Last, First, Middle Initial) James Holmes | 1 | | Date of Receipt |
| Mailing Address 4 Avallon Way | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 20101129125544-2 |
| Altamont | NY | 12009 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 20.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Sr. Mana | n Iger, Sales Training | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 420.00 | |
| Full Name (Last, First, Middle Initial) Lynne Hunt | 1 | | Date of Receipt |
| Mailing Address 2029 Cahaba Crest Dr | • | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 20101129125559-2 |
| <u>Bham</u> | AL | 35242 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 30.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Sr. Onco | n logy Sales Specialist | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 630.00 | |
| | I | | 70.00 |

| SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 16 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 |
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| Any information copied from such Reports and or for commercial purposes, other than using t | Statements may not be sold or used by any pe he name and address of any political committee | rson for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PA | С | |
| Full Name (Last, First, Middle Initial) Lynne Hunt | | Date of Receipt |
| Mailing Address 2029 Cahaba Crest | | 10 30 7 2010 |
| City <u>Bham</u> | State Zip Code AL 35242 | Transaction ID: 2010112913059-28 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 30.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Sr. Oncology Sales Specialist | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 630.00 | |
| Full Name (Last, First, Middle Initial) Lynne Hunt | | Date of Receipt |
| Mailing Address 2029 Cahaba Crest | Or | 11 15 7 2010 |
| City | State Zip Code | Transaction ID: 20101129125544-2 |
| Bham FEC ID number of contributing federal political committee. | AL 35242 | Amount of Each Receipt this Period 30.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Sr. Oncology Sales Specialist | |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date ▼ 630.00 | |
| Full Name (Last, First, Middle Initial) William Hyden | | Date of Receipt |
| Mailing Address 18618 Irvine Way | | M M / D D / Y Y Y Y Y 1 1 1 1 5 2 0 1 0 |
| City Lakeville | State Zip Code MN 55044 | Transaction ID: 20101129125544-14 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 10.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Area Director | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 210.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 70.00 |

| SCHEDULE A (FEC FITEMIZED RECEIPTS | Use separate schedu for each category of t Detailed Summary Pa | the Collect Only Only |
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| Any information copied from such or for commercial purposes, other NAME OF COMMITTEE (In F. Millennium Pharmaceutical | , | any person for the purpose of soliciting contributions |
| Full Name (Last, First, Middle I Elizabeth Lewis Mailing Address 32 Cressb | , | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Concord FEC ID number of contributing | State Zip Code MA 01742-5304 | Transaction ID: 20101129125559-30 Amount of Each Receipt this Period 50.00 |
| Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary Genera Other (specify) | Occupation VP, Commercial Law Aggregate Year-to-Date ▼ | |
| Full Name (Last, First, Middle I Elizabeth Lewis Mailing Address 32 Cressb | · | Date of Receipt 1 0 3 0 2 0 1 0 |
| City | State Zip Code | Transaction ID: 2010112913059-30 |
| Concord | MA 01742-5304 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 50.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation VP, Commercial Law | |
| Receipt For: Primary Genera Other (specify) ▼ | Aggregate Year-to-Date ▼ | 0.00 |
| Full Name (Last, First, Middle I Elizabeth Lewis | nitial) | Date of Receipt |
| Mailing Address 32 Cressb | | 1 1 1 1 5 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City <u>Concord</u> | State Zip Code MA 01742-5304 | Transaction ID: 20101129125544-29 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 50.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation VP, Commercial Law | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 1050 | 0.00 |
| SUBTOTAL of Receipts This Pa | ge (optional) | 150.00 |

| SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | for each of | rate schedule(s) category of the Summary Page | FOR LINE NUMBER: PAGE 18 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 |
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| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (I.e. F. III) | Statements may not be sold e name and address of any p | or used by any person political committee to s | for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PA | | | |
| Full Name (Last, First, Middle Initial) Sabina McCafferty | | | Date of Receipt |
| Mailing Address 2639 Pointewood Lo | • | | 10 15 2010 |
| City <u>Galena</u> | State Zip Cod OH 43021 | le | Transaction ID: 20101129125559-2 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 30.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Health Systems Ma | nager | |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ | Aggregate Year-to-Date | 630.00 | |
| Full Name (Last, First, Middle Initial) Sabina McCafferty | | | Date of Receipt |
| Mailing Address 2639 Pointewood Lo | pp | | 10 30 7 2010 |
| City | State Zip Cod | le | Transaction ID: 2010112913059-21 |
| Galena FEC ID number of contributing federal political committee. | OH 43021 | 1 1 1 | Amount of Each Receipt this Period 30.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Health Systems Ma | nager | - |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date | 630.00 | |
| Full Name (Last, First, Middle Initial) Sabina McCafferty | | | Date of Receipt |
| Mailing Address 2639 Pointewood Lo | pp | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Galena | State Zip Cod OH 43021 | le | Transaction ID: 20101129125544-20 |
| FEC ID number of contributing federal political committee. | C 43021 | 0 0 | Amount of Each Receipt this Period 30.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Health Systems Ma | nager | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date | 630.00 | |
| SUBTOTAL of Receipts This Page (optional) | 1 | | 90.00 |

| | CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 19/34 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| , | nny information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) | tatements may name and add | y not be sold or used by any pers dress of any political committee to | |
| \angle | Millennium Pharmaceuticals Inc. PAC | | | |
| ۱. | Full Name (Last, First, Middle Initial) Susan McFadden | | | Date of Receipt |
| | Mailing Address 855 La Mirada St | | | 1 1 1 5 2 0 1 0 |
| | City | State | Zip Code | Transaction ID: 20101129125544-15 |
| | Laguna Beach | CA | 92651 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 10.00 |
| | Name of Employer Millennium Pharmaceuticals | Occupation | n Sales Manager | |
| | Inc. Receipt For: | , | Year-to-Date V | |
| | Primary General Other (specify) ▼ | | 210.00 | |
| _ | Full Name (Last, First, Middle Initial) Isabelle Mercier | | | Date of Receipt |
| | Mailing Address 350th Third St. #1008 | | | 10 15 2010 |
| | City | State | Zip Code | Transaction ID: EC83352BFE4A66A9A |
| | Cambridge | MA | 02142 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Name of Employer Millennium Pharmaceuticals | Occupation VP Mark | | |
| | Inc. Receipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 525.00 | |
| _ | Full Name (Last, First, Middle Initial) | | | Date of Receipt |
| • | Mailing Address 350th Third St. #1008 | | | M M / D D / Y Y Y Y Y Y 1 1 0 3 0 2 0 1 0 |
| | City | State | Zip Code | Transaction ID: 9EB16E9268A21CD399 |
| | Cambridge | MA | 02142 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Name of Employer Millennium Pharmaceuticals Inc. | Occupation VP Mark | | |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 525.00 | |
| Γ | SUBTOTAL of Receipts This Page (optional) | | | 60.00 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 20 / 34 (check only one) X 11a |
|---|--|---|
| Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PA | Statements may not be sold or used by any persone name and address of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Isabelle Mercier Mailing Address 350th Third St. #100 City Cambridge FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) | State Zip Code MA 02142 C Occupation VP Marketing Aggregate Year-to-Date 525.00 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Full Name (Last, First, Middle Initial) Amy Modean Mailing Address 8312 Deer Pond Trai City Lake Elmo FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) | State Zip Code MN 55042 C Occupation Health Systems Manager Aggregate Year-to-Date 350.00 | Date of Receipt M M M / D D / Y Y Y Y Y 1 0 1 5 2 0 1 0 Transaction ID: 20101130104026-12 Amount of Each Receipt this Period 25.00 |
| Full Name (Last, First, Middle Initial) Amy Modean Mailing Address 8312 Deer Pond Trai City Lake Elmo FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) | State Zip Code MN 55042 C Occupation Health Systems Manager Aggregate Year-to-Date 350.00 | Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| SUBTOTAL of Receipts This Page (optional) | | 75.00 |

| Any information copied from such Reports and Sta or for commercial purposes, other than using the nature of the na | state Zip Code MN 55042 C Occupation Health Systems Manager Aggregate Year-to-Date | Date of Receipt Date of Receipt 1 |
|--|--|---|
| Full Name (Last, First, Middle Initial) Amy Modean Mailing Address 8312 Deer Pond Trail N City Lake Elmo FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Karen Odierna | MN 55042 C Occupation Health Systems Manager | Transaction ID: 20101130104026-11 Amount of Each Receipt this Period |
| Amy Modean Mailing Address 8312 Deer Pond Trail N City Lake Elmo FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Karen Odierna | MN 55042 C Occupation Health Systems Manager | Transaction ID: 20101130104026-11 Amount of Each Receipt this Period |
| City Lake Elmo FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Karen Odierna | MN 55042 C Occupation Health Systems Manager | 1 1 1 5 2 0 1 0 Transaction ID: 20101130104026-1 Amount of Each Receipt this Period |
| Lake Elmo FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Karen Odierna | MN 55042 C Occupation Health Systems Manager | Transaction ID: 20101130104026-1 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Karen Odierna | Occupation Health Systems Manager | |
| Receipt For: Other (specify) ▼ Full Name (Last, First, Middle Initial) Karen Odierna | Occupation Health Systems Manager | 25.00 |
| Inc. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Karen Odierna | Health Systems Manager | |
| Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Karen Odierna | | |
| Other (specify) Full Name (Last, First, Middle Initial) Karen Odierna | 33 - 3 | - |
| Karen Odierna | 350.00 | |
| | | Date of Receipt |
| | | M M / D D / Y Y Y Y Y Y 1 1 1 1 5 2 0 1 0 |
| City | State Zip Code | Transaction ID: 20101129125544-10 |
| Sarasota | FL 34238 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 10.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Sr. Oncology Sales Specialist | |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date ▼ 210.00 | |
| Full Name (Last, First, Middle Initial) Mary Ordal | | Date of Receipt |
| Mailing Address 1435 York Ave | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 20101129125559-2 |
| New York | NY 10075-2523 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 30.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Regional Sales Manager | |
| Receipt For: | Aggregate Year-to-Date ▼ | 7 |
| Primary General Other (specify) ▼ | 630.00 | |
| SUBTOTAL of Receipts This Page (optional) | | 1 |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 22 / 34 (check only one) X 11a 11b 11c 12 |
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| Any information copied from such Reports an or for commercial purposes, other than using | d Statements may not be sold or used by any persor the name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PA | AC | |
| Full Name (Last, First, Middle Initial) Mary Ordal | | Date of Receipt |
| Mailing Address 1435 York Ave | | 10 30 2010 |
| City | State Zip Code | Transaction ID: 2010112913059-22 |
| New York | NY 10075-2523 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 30.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Regional Sales Manager | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 630.00 | |
| Full Name (Last, First, Middle Initial) Mary Ordal | | Date of Receipt |
| Mailing Address 1435 York Ave | | M M / D D / Y Y Y Y Y Y 1 1 1 5 2 0 1 0 |
| City | State Zip Code | Transaction ID: 20101129125544-21 |
| New York | NY 10075-2523 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 30.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Regional Sales Manager | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 630.00 | |
| Full Name (Last, First, Middle Initial) Marc Peart | | Date of Receipt |
| Mailing Address 17945 Stillmore St | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 20101129125544-17 |
| Canyon Country | CA 91387 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 10.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Sr. Oncology Sales Specialist | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 210.00 | |
| |) | 70.00 |

| | EDULE A (FEC Form 3X) IIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 23 / 34 (check only one) X 11a 11b 11c 12 |
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| Any info | ormation copied from such Reports and ommercial purposes, other than using the | Statements may not be sold or used by any persele name and address of any political committee t | son for the purpose of soliciting contributions o solicit contributions from such committee. |
| NAN | ME OF COMMITTEE (In Full) lennium Pharmaceuticals Inc. PAG | | |
| | Name (Last, First, Middle Initial) Regan | | Date of Receipt |
| | ing Address 3 Legion Rd | | 10 15 2010 |
| City | | State Zip Code | Transaction ID: 20101129125559-31 |
| | eston | MA 02493-2119 | Amount of Each Receipt this Period |
| | CID number of contributing eral political committee. | C | 50.00 |
| Nan Mille Inc. | ne of Employer ennium Pharmaceuticals | Occupation VP, US Sales | |
| | eipt For: | Aggregate Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 1050.00 | |
| | Name (Last, First, Middle Initial) Regan | | Date of Receipt |
| | ing Address 3 Legion Rd | | 10 30 2010 |
| City | | State Zip Code | Transaction ID: 2010112913059-31 |
| <u>We</u> | eston | MA 02493-2119 | Amount of Each Receipt this Period |
| | CID number of contributing eral political committee. | C | 50.00 |
| Nan Mille Inc. | ne of Employer ennium Pharmaceuticals | Occupation VP, US Sales | |
| | eipt For: | Aggregate Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 1050.00 | |
| | Name (Last, First, Middle Initial) Regan | | Date of Receipt |
| | ing Address 3 Legion Rd | | 1 1 1 5 2 0 1 0 |
| City | | State Zip Code | Transaction ID: 20101129125544-3 |
| <u>We</u> | eston | MA 02493-2119 | Amount of Each Receipt this Period |
| FEC fede | CID number of contributing ral political committee. | C | 50.00 |
| Nan Mille Inc. | ne of Employer ennium Pharmaceuticals | Occupation VP, US Sales | |
| | eipt For: | Aggregate Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 1050.00 | |
| | | | 150.00 |

| SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 24 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 1 |
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| Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. F | and Statements may not be sold or used by any person g the name and address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Sara Riedel Mailing Address 4530 Promenade I | _ane | Date of Receipt |
| City Sylvania FEC ID number of contributing federal political committee. | State Zip Code OH 43560 | 1 0 1 5 2 0 1 0 Transaction ID: 20101129125559-36 Amount of Each Receipt this Period 20.00 |
| Name of Employer Millennium Pharmaceuticals Inc. Receipt For: □ Primary □ General □ Other (specify) ▼ | Occupation Sr. Oncology Sales Specialist Aggregate Year-to-Date ▼ 420.00 | |
| Full Name (Last, First, Middle Initial) Sara Riedel Mailing Address 4530 Promenade I | _ane | Date of Receipt 1 0 3 0 2 0 1 0 |
| City Sylvania FEC ID number of contributing | State Zip Code OH 43560 | Transaction ID: 2010112913059-36 Amount of Each Receipt this Period |
| Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary Other (specify) ▼ | Occupation Sr. Oncology Sales Specialist Aggregate Year-to-Date 420.00 | 20.00 |
| Full Name (Last, First, Middle Initial) Sara Riedel Mailing Address 4530 Promenade I | _ane | Date of Receipt |
| City Sylvania FEC ID number of contributing federal political committee. | State Zip Code OH 43560 | Transaction ID: 20101129125544-35 Amount of Each Receipt this Period 20.00 |
| Name of Employer Millennium Pharmaceuticals Inc. Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ | Occupation Sr. Oncology Sales Specialist Aggregate Year-to-Date 420.00 | |
| SUBTOTAL of Receipts This Page (option | al) | 60.00 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Benorts and | Use separate schedule(s) for each category of the Detailed Summary Page Statements may not be sold or used by any persor | FOR LINE NUMBER: PAGE 25 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PAC | e name and address of any political committee to s | solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Warren Rohal Mailing Address 29655 Fran Drive | | Date of Receipt |
| City | State Zip Code | 1 0 1 5 2 0 1 0 Transaction ID: 20101129125559-23 |
| Evergreen | CO 80439 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 30.00 |
| Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) ▼ | Occupation Sr. Oncology Sales Specialist Aggregate Year-to-Date 630.00 | |
| Full Name (Last, First, Middle Initial) B. Warren Rohal | | Date of Receipt |
| Mailing Address 29655 Fran Drive | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State Zip Code | Transaction ID: 2010112913059-23 |
| Evergreen | CO 80439 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 30.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Sr. Oncology Sales Specialist | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 630.00 | |
| Full Name (Last, First, Middle Initial) C. Warren Rohal | | Date of Receipt |
| Mailing Address 29655 Fran Drive | | M M / D D / Y Y Y Y Y 1 1 1 1 1 5 2 0 1 0 |
| City | State Zip Code | Transaction ID: 20101129125544-22 |
| Evergreen | CO 80439 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | 30.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Sr. Oncology Sales Specialist | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 630.00 | |
| SUBTOTAL of Receipts This Page (optional) | > | 90.00 |

| SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 26 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 16 |
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| Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. P | nd Statements may not be sold or used by any pers the name and address of any political committee to | |
| Full Name (Last, First, Middle Initial) Thomas Rotte Mailing Address 4530 Promenade L | | Date of Receipt |
| City Sylvania | State Zip Code OH 43560-2984 | Transaction ID: 5D06A163058F40E69 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 25.00 |
| Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) ▼ | Occupation Health Systems Manager Aggregate Year-to-Date 525.00 | |
| Full Name (Last, First, Middle Initial) Thomas Rotte Mailing Address 4530 Promenade L | n | Date of Receipt 1 0 3 0 2 0 1 0 |
| City | State Zip Code | Transaction ID: 56FCF40392029EB30 |
| Sylvania | OH 43560-2984 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 25.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Health Systems Manager | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 525.00 | |
| Full Name (Last, First, Middle Initial) Thomas Rotte | 1 | Date of Receipt |
| Mailing Address 4530 Promenade L | n | 11 1 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City <u>S</u> ylvania | State Zip Code OH 43560-2984 | Transaction ID: 338EADCF01FC864E Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 25.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Health Systems Manager | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 525.00 | |
| CURTOTAL of Possints This Page (entire) | d) | 75.00 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 27 / 34 (check only one) X |
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| Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PAC | name and add | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Elizabeth Rush | | | Date of Receipt |
| Mailing Address 7331 Booth City | State | Zip Code | 1 0 1 5 2 0 1 0 Transaction ID: 20101130104026-3 |
| Praire Village | KS | 66208 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 00200 | 25.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Sr. Onco | n logy Sales Specialist | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 400.00 | |
| Full Name (Last, First, Middle Initial) Elizabeth Rush Mailing Address 7331 Booth | | | Date of Receipt |
| | | | 10 30 2010 |
| City | State | Zip Code | Transaction ID: 20101130104026-1 |
| Praire Village | KS | 66208 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | . ' | logy Sales Specialist | |
| Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | - |
| Other (specify) | | 400.00 | |
| Full Name (Last, First, Middle Initial) Elizabeth Rush | | | Date of Receipt |
| Mailing Address 7331 Booth | | | 1 1 1 5 2 0 1 0 |
| City | State | Zip Code | Transaction ID: 20101130104026-2 |
| Praire Village | KS | 66208 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 25.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | , ' | logy Sales Specialist | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 400.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 75.00 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 28 / 34 (check only one) X 11a 11b 11c 12 |
|---|-----------------------|---|--|
| Any information copied from such Reports and or for commercial purposes, other than using the | Statements may | y not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions o solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PAC | ; | | |
| Full Name (Last, First, Middle Initial) Pamela Schneider | | | Date of Receipt |
| Mailing Address 34 Woburn Abbey Av | е | | M M / D D / Y Y Y Y Y 1 Y 1 1 1 1 5 2 0 1 0 |
| City | State | Zip Code | Transaction ID: 20101129125544-1 |
| Camp Hill | PA | 17011 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 10.00 |
| Name of Employer Millennium Pharmaceuticals | Occupation Sr Onco | n logy Sales Specialist | |
| Inc. Receipt For: | | e Year-to-Date | \dashv |
| Primary General Other (specify) ▼ | Aggregate | 210.00 | |
| Full Name (Last, First, Middle Initial) Robert Slomka | 1 | | Date of Receipt |
| Mailing Address 206 Forest Knoell Ct | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 20101129125559-5 |
| Fishers | IN | 46037 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Regional | n Sales Manager | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 400.00 | |
| Full Name (Last, First, Middle Initial) Robert Slomka | | | Date of Receipt |
| Mailing Address 206 Forest Knoell Ct | | | 10 30 2010 |
| City | State | Zip Code | Transaction ID: 2010112913059-50 |
| Fishers | IN | 46037 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Regional | n Sales Manager | |
| Receipt For: | Aggregate | e Year-to-Date | |
| Primary General Other (specify) ▼ | | 400.00 | |
| SUBTOTAL of Receipts This Page (optional) . | | | 60.00 |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 29 / 34 (check only one) |
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| Any information copied from such Reports an or for commercial purposes, other than using | nd Statements may the name and addr | not be sold or used by any persecess of any political committee to | on for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. Pa | | , p | |
| Full Name (Last, First, Middle Initial) Robert Slomka | | | Date of Receipt |
| Mailing Address 206 Forest Knoell C | t | | M M / D D / Y Y Y Y |
| City Fishers | State IN | Zip Code 46037 | Transaction ID: 20101129125544-49 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Regional S | Sales Manager | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate ` | Year-to-Date ▼ 400.00 | |
| Full Name (Last, First, Middle Initial) Mark Vages | | | Date of Receipt |
| Mailing Address 12 Thornfield Lane | | | 1 0 1 5 2 0 1 0 |
| City Hawthorn Woods | State IL | Zip Code 60047 | Transaction ID: 20101130104026-15 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Millennium Pharmaceuticals | Occupation | Account Executive | |
| Inc. Receipt For: Primary General Other (specify) ▼ | | Year-to-Date ▼ | |
| Full Name (Last, First, Middle Initial) Mark Vages | | | Date of Receipt |
| Mailing Address 12 Thornfield Lane | | | M M / D D / Y Y Y Y Y 1 Y 1 1 D D 2 D 1 D D 2 D D D D D D D D D D |
| City Hawthorn Woods | State | Zip Code | Transaction ID: 20101130104026-13 |
| FEC ID number of contributing federal political committee. | C | 60047 | Amount of Each Receipt this Period 25.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | | account Executive | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate \ | Year-to-Date ▼ 350.00 | |
| SUBTOTAL of Receipts This Page (optiona |]) | | 75.00 |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS | ·) | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 30 / 34 (check only one) |
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| Any information copied from such Reports and or for commercial purposes, other than using | d Statements may | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PA | | · · · | |
| Full Name (Last, First, Middle Initial) Mark Vages | | | Date of Receipt |
| Mailing Address 12 Thornfield Lane | | | 1 1 1 5 2 0 1 0 |
| City Hawthorn Woods | State IL | Zip Code 60047 | Transaction ID: 20101130104026-14 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupatio National | n Account Executive | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 350.00 |] |
| Full Name (Last, First, Middle Initial) Mary Wadlinger Mailing Address 19 Holly Ridge Rd | · | | Date of Receipt |
| City | State | Zip Code | 10 15 2010 |
| North Andover | MA | 01845-4732 | Transaction ID: 20101129125559-2 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 30.00 |
| Name of Employer Millennium Pharmaceuticals | Occupatio Sr. Dir | n Human Resources | |
| Inc. Receipt For: | | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 630.00 | |
| Full Name (Last, First, Middle Initial) Mary Wadlinger | | | Date of Receipt |
| Mailing Address 19 Holly Ridge Rd | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 2010112913059-24 |
| North Andover | MA | 01845-4732 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 30.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | | Human Resources | |
| Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | 1 |
| Other (specify) ▼ | | 630.00 |] |
| | | | 85.00 |

| | SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 31 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|-----------------|--|----------------------|---|---|
| | Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PAC | e name and ado | v not be sold or used by any pers dress of any political committee t | on for the purpose of soliciting contributions |
| ∠ A . | Full Name (Last, First, Middle Initial) Mary Wadlinger Mailing Address 19 Holly Ridge Rd | | | Date of Receipt |
| | City North Andover FEC ID number of contributing | State MA | Zip Code 01845-4732 | Amount of Each Receipt this Period |
| | Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) | | n Human Resources Year-to-Date ▼ | 30.00 |
| _ В. | Full Name (Last, First, Middle Initial) Jim Weber Mailing Address 2913 Q Ave | 1 | | Date of Receipt 1 0 1 5 2 0 1 0 |
| | City | State | Zip Code | Transaction ID: 3D32781264D7432381E |
| | Parnell FEC ID number of contributing federal political committee. Name of Employer Millennium Pharmaceuticals Inc. | Occupation Sales Spo | | Amount of Each Receipt this Period 25.00 |
| _ | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 525.00 | |
|) . | Full Name (Last, First, Middle Initial) Jim Weber Mailing Address 2913 Q Ave | | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: 7CB02A4B79E5B1991E |
| | Parnell FEC ID number of contributing federal political committee. | C | 52325-8842 | Amount of Each Receipt this Period 25.00 |
| | Name of Employer Millennium Pharmaceuticals Inc. Receipt For: ☐ Primary ☐ General Other (specify) ▼ | Occupation Sales Spo | | |
| | SUBTOTAL of Receipts This Page (optional) | | | 80.00 |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 32 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar | ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. PAC | Statements may not be sold or used by any persename and address of any political committee | |
| | Full Name (Last, First, Middle Initial) Jim Weber Mailing Address 2913 Q Ave City | State Zip Code | Date of Receipt M |
| | Parnell FEC ID number of contributing federal political committee. | IA 52325-8842 | Amount of Each Receipt this Period 25.00 |
| | Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) | Occupation Sales Specialist Aggregate Year-to-Date ▼ 525.00 | |
| | Full Name (Last, First, Middle Initial) Brent Wingerson Mailing Address 5311 NE 24th Ct | | Date of Receipt |
| | City | State Zip Code | Transaction ID: 20101129125559-45 |
| | Newcastle FEC ID number of contributing federal political committee. | WA 98059 | Amount of Each Receipt this Period 25.00 |
| | Name of Employer Millennium Pharmaceuticals Inc. Receipt For: | Occupation Sr. Oncology Sales Specialist Aggregate Year-to-Date ▼ | |
| | Primary ☐ General Other (specify) ▼ | 525.00 | |
| | Full Name (Last, First, Middle Initial) Brent Wingerson | | Date of Receipt |
| | Mailing Address 5311 NE 24th Ct | | 10 30 2010 |
| | City Newcastle | State Zip Code WA 98059 | Transaction ID: 2010112913059-45 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 25.00 |
| | Name of Employer Millennium Pharmaceuticals Inc. | Occupation Sr. Oncology Sales Specialist | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 525.00 | |
| s | SUBTOTAL of Receipts This Page (optional) | | 75.00 |

| SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 33 / 34 (check only one) X |
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| Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Millennium Pharmaceuticals Inc. P | nd Statements may not be sold or used by any persor the name and address of any political committee to s | n for the purpose of soliciting contributions solicit contributions from such committee. |
| Full Name (Last, First, Middle Initial) Brent Wingerson Mailing Address 5311 NE 24th Ct | | Date of Receipt |
| City Newcastle FEC ID number of contributing federal political committee. | State Zip Code WA 98059 | 1 1 1 5 2 0 1 0 Transaction ID: 20101129125544-44 Amount of Each Receipt this Period 25.00 |
| Name of Employer Millennium Pharmaceuticals Inc. Receipt For: □ Primary □ General □ Other (specify) ▼ | Occupation Sr. Oncology Sales Specialist Aggregate Year-to-Date ▼ 525.00 | |
| Full Name (Last, First, Middle Initial) Michael Zdrojewski Mailing Address 57 Christian Way | I | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y |
| City North Andover | State Zip Code MA 01845-2233 | Transaction ID: 20101129125559-26 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 20.00 |
| Name of Employer Millennium Pharmaceuticals Inc. Receipt For: Primary General Other (specify) ▼ | Occupation Director, Sales Strategy Aggregate Year-to-Date ▼ 420.00 | |
| Full Name (Last, First, Middle Initial) Michael Zdrojewski | | Date of Receipt |
| Mailing Address 57 Christian Way | | 10 30 7 2010 |
| City North Andover | State Zip Code MA 01845-2233 | Transaction ID: 2010112913059-26 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 20.00 |
| Name of Employer Millennium Pharmaceuticals Inc. | Occupation Director, Sales Strategy | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 420.00 | |
| SUBTOTAL of Receipts This Page (options | 1) | 65.00 |

| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 34 / 34 |
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| TEMIZED RECEIPTS | | for each category of the Detailed Summary Page | X 11a 11b 11c 12 |
| | | | 13 14 15 16 17 |
| Any information copied from such Reports and or for commercial purposes, other than using th | Statements ma e name and ad | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | | |
| Millennium Pharmaceuticals Inc. PAG | | | |
| / | | | |
| Full Name (Last, First, Middle Initial) | | | |
| Michael Zdrojewski | | | Date of Receipt |
| Mailing Address 57 Christian Way | | | 1 1 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: 20101129125544-25 |
| North Andover | MA | 01845-2233 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 20.00 |
| | | | |
| Name of Employer Millennium Pharmaceuticals | Occupation | | |
| Inc. | Director, | Sales Strategy | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General | | 420.00 | |

| SUBTOTAL of Receipts This Page (optional) | • | 20.00 |
|---|----------|---------|
| TOTAL This Period (last page this line number only) | • | 2965.00 |