

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Shire Holdings US AG Political Action Committee AKA Shire PAC

ADDRESS (number and street) 901 15th Street, NW

Suite 510

Check if different than previously reported. (ACC) Washington DC 20005

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00578336

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

(d) 30-Day POST-Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 01 / 01 / 2018 through M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
 Type or Print Name of Treasurer Perry, Jed, , ,

Signature of Treasurer Perry, Jed, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 04 / 09 / 2018

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Shire Holdings US AG Political Action Committee AKA Shire PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		44250.84
(b) Cash on Hand at Beginning of Reporting Period.....	44250.84	
(c) Total Receipts (from Line 19) .....	4615.10	4615.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	48865.94	48865.94
7. Total Disbursements (from Line 31).....	4000.00	4000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	44865.94	44865.94
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

**Shire Holdings US AG Political Action Committee AKA Shire PAC**

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).....	1888.25	1888.25
(ii) Unitemized .....	2726.85	2726.85
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4615.10	4615.10
(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) .....	4615.10	4615.10
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)).....▶	4615.10	4615.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4615.10	4615.10

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	4000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4000.00	4000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4000.00	4000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4615.10	4615.10
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4615.10	4615.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**Shire Holdings US AG Political Action Committee AKA Shire PAC**

**A. Brown, Susan, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 965 Auburn Ave  
 City Highland Park State IL Zip Code 60035-1119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Biolife Plasma L.L.C. Occupation (for Individual) Head of BioLife Operating Unit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 546.00

Date of Receipt **02 / 09 / 2018**  
**Transaction ID : 20180209\_81**  
 Amount of Each Receipt this Period 91.00  
 Memo Item

**B. Brown, Susan, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 965 Auburn Ave  
 City Highland Park State IL Zip Code 60035-1119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Biolife Plasma L.L.C. Occupation (for Individual) Head of BioLife Operating Unit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 546.00

Date of Receipt **02 / 23 / 2018**  
**Transaction ID : 20180223\_137**  
 Amount of Each Receipt this Period 91.00  
 Memo Item

**C. Brown, Susan, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 965 Auburn Ave  
 City Highland Park State IL Zip Code 60035-1119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Biolife Plasma L.L.C. Occupation (for Individual) Head of BioLife Operating Unit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 546.00

Date of Receipt **03 / 09 / 2018**  
**Transaction ID : 20180309\_53**  
 Amount of Each Receipt this Period 91.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	273.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Shire Holdings US AG Political Action Committee AKA Shire PAC**

**A. Brown, Susan, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 965 Auburn Ave  
 City Highland Park State IL Zip Code 60035-1119  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Biolife Plasma L.L.C. Occupation (for Individual) Head of BioLife Operating Unit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 546.00

Date of Receipt **03 / 23 / 2018**  
**Transaction ID : 20180323\_109**  
 Amount of Each Receipt this Period 91.00  
 Memo Item

**B. Creviston, Sarah, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Wynstone Way  
 City North Barrington State IL Zip Code 60010-6950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baxalta US Inc. Occupation (for Individual) Head of Patient Advocacy and Public A  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **01 / 26 / 2018**  
**Transaction ID : 20180126\_163**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

**C. Creviston, Sarah, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Wynstone Way  
 City North Barrington State IL Zip Code 60010-6950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baxalta US Inc. Occupation (for Individual) Head of Patient Advocacy and Public Af  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **02 / 09 / 2018**  
**Transaction ID : 20180209\_79**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	341.00
<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 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Shire Holdings US AG Political Action Committee AKA Shire PAC**

**A. Creviston, Sarah, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Wynstone Way  
 City North Barrington State IL Zip Code 60010-6950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baxalta US Inc. Occupation (for Individual) Head of Patient Advocacy and Public A  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2018  
**Transaction ID : 20180223\_135**  
 Amount of Each Receipt this Period  
 125.00  
 Memo Item

**B. Creviston, Sarah, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Wynstone Way  
 City North Barrington State IL Zip Code 60010-6950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baxalta US Inc. Occupation (for Individual) Head of Patient Advocacy and Public A  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 09 / 2018  
**Transaction ID : 20180309\_51**  
 Amount of Each Receipt this Period  
 125.00  
 Memo Item

**C. Creviston, Sarah, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Wynstone Way  
 City North Barrington State IL Zip Code 60010-6950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baxalta US Inc. Occupation (for Individual) Head of Patient Advocacy and Public Af  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 23 / 2018  
**Transaction ID : 20180323\_107**  
 Amount of Each Receipt this Period  
 125.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<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 14
	<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)  
**Shire Holdings US AG Political Action Committee AKA Shire PAC**

**A. Dickson, Rodney, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2638 Canyon South Dr  
 City Palm Springs State CA Zip Code 92264-9422  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baxalta US Inc. Occupation (for Individual) National Lead Patient Advocacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 09 / 2018  
**Transaction ID : 20180309\_49**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Dickson, Rodney, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2638 Canyon South Dr  
 City Palm Springs State CA Zip Code 92264-9422  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baxalta US Inc. Occupation (for Individual) National Lead Patient Advocacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 23 / 2018  
**Transaction ID : 20180323\_105**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. LaMarca, Brian, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2261 Zach Scott St  
 City Austin State TX Zip Code 78723-5463  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Biolife Plasma L.L.C. Occupation (for Individual) Region Operations Lead  
 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  
 03 / 23 / 2018  
**Transaction ID : 20180323\_85**  
 Amount of Each Receipt this Period 37.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	137.50
<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 14
	<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)  
**Shire Holdings US AG Political Action Committee AKA Shire PAC**

**A. Monk, Brandon, Joseph Duane, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 217 E Center Ave  
 City Lake Bluff State IL Zip Code 60044-2503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baxalta US Inc. Occupation (for Individual) US Immunology Sales Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 09 / 2018  
**Transaction ID : 20180309\_28**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Monk, Brandon, Joseph Duane, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 217 E Center Ave  
 City Lake Bluff State IL Zip Code 60044-2503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baxalta US Inc. Occupation (for Individual) US Immunology Sales Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 23 / 2018  
**Transaction ID : 20180323\_84**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Vera, Onelia, Ann, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 619 Oleander Dr  
 City Hallandale Beach State FL Zip Code 33009-6531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baxalta US Inc. Occupation (for Individual) Head Counsel Hematology and Oncolog  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 794.10

Date of Receipt 01 / 26 / 2018  
**Transaction ID : 20180126\_160**  
 Amount of Each Receipt this Period 132.35  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	232.35
<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 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Shire Holdings US AG Political Action Committee AKA Shire PAC**

**A. Vera, Onelia, Ann, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 619 Oleander Dr  
 City Hallandale Beach State FL Zip Code 33009-6531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baxalta US Inc. Occupation (for Individual) Head Counsel Hematology and Oncology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 794.10

Date of Receipt **02 / 09 / 2018**  
**Transaction ID : 20180209\_76**  
 Amount of Each Receipt this Period 132.35  
 Memo Item

**B. Vera, Onelia, Ann, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 619 Oleander Dr  
 City Hallandale Beach State FL Zip Code 33009-6531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baxalta US Inc. Occupation (for Individual) Head Counsel Hematology and Oncology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 794.10

Date of Receipt **02 / 23 / 2018**  
**Transaction ID : 20180223\_132**  
 Amount of Each Receipt this Period 132.35  
 Memo Item

**C. Vera, Onelia, Ann, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 619 Oleander Dr  
 City Hallandale Beach State FL Zip Code 33009-6531  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Baxalta US Inc. Occupation (for Individual) Head Counsel Hematology and Oncology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 794.10

Date of Receipt **03 / 09 / 2018**  
**Transaction ID : 20180309\_48**  
 Amount of Each Receipt this Period 132.35  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	397.05
<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: PAGE 12 OF 14  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Shire Holdings US AG Political Action Committee AKA Shire PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Vera, Onelia, Ann, ,

Mailing Address 619 Oleander Dr

City Hallandale Beach	State FL	Zip Code 33009-6531
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) Baxalta US Inc.	Occupation (for Individual) Head Counsel Hematology and Oncology
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
794.10

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2018

**Transaction ID : 20180323\_104**

Amount of Each Receipt this Period  

132.35
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 Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period  

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 Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period  

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 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	132.35
<b>TOTAL</b> This Period (last page this line number only).....	1888.25

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**Shire Holdings US AG Political Action Committee AKA Shire PAC**

**A. Bob Casey For Senate Inc**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 58746

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement 2018 Primary

Candidate Name Casey, Robert, P., , Jr

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: PA District:

Date of Disbursement 03 / 23 / 2018

FEC Identification Number C00431056  
Transaction ID : 42E02A341B  
Amount of Each Disbursement this Period 1000.00

Memo Item

**B. Katherine Clark For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 159

City Belmont State MA Zip Code 02478-9998

Purpose of Disbursement 2018 Primary

Candidate Name Clark, Katherine, M., ,

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: MA District: 05

Date of Disbursement 02 / 12 / 2018

FEC Identification Number C00541888  
Transaction ID : BCF509B26F  
Amount of Each Disbursement this Period 1000.00

Memo Item

**C. Schneider For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1318

City Deerfield State IL Zip Code 60015

Purpose of Disbursement 2018 General

Candidate Name Schneider, Bradley, Scott, ,

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: IL District: 10

Date of Disbursement 03 / 23 / 2018

FEC Identification Number C00495952  
Transaction ID : B536D18ECF  
Amount of Each Disbursement this Period 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Shire Holdings US AG Political Action Committee AKA Shire PAC**

### A. Tony Cardenas For Congress

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 410 1St St, SE  
Suite 310

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2018

City Washington State DC Zip Code 20003

FEC Identification Number

Purpose of Disbursement  
2018 Primary

C	C00498873
---	-----------

Candidate Name  
**Cardenas, Tony, , ,**

011
Category/ Type

Transaction ID : **ABF05D2A9F**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: CA District: 29

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

1000.00
---------

Memo Item

### B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

--

Memo Item

### C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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Memo Item

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

1000.00
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**TOTAL** This Period (last page this line number only).....▶

4000.00
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