

# 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**  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

ADDRESS (number and street) **86 MORRIS AVENUE**  
Check if different than previously reported. (ACC) **SUMMIT NJ 07901**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00514331** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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

5. Covering Period  05 /  01 /  2020 through  05 /  31 /  2020

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

Signature of Treasurer *Gliha, Patrick, , ,* [Electronically Filed] Date  06 /  17 /  2020

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)

Page 2

Write or Type Committee Name

**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

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="2020"/>	<input type="text"/>	<input type="text" value="82497.90"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="109605.55"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="7120.58"/>	<input type="text" value="37999.23"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="116726.13"/>	<input type="text" value="120497.13"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="12.00"/>	<input type="text" value="3783.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="116714.13"/>	<input type="text" value="116714.13"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

CELGENE CORPORATION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 05 / 01 / 2020 To: 05 / 31 / 2020

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).....	2282.00	5702.00
(ii) Unitemized .....	4838.00	32293.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7120.00	37995.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	7120.00	37995.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.58	4.23
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)).....▶	7120.58	37999.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7120.58	37999.23

**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	15.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	15.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	3806.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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 .....	12.00	12.00
(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)).....	12.00	12.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	- 50.00
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)) ..	12.00	3783.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12.00	3783.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	7120.00	37995.00
34. Total Contribution Refunds (from Line 28(d)) .....	12.00	12.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7108.00	37983.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	15.00
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	15.00

**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 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Ahmed, Nadim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) EVP & President of Hematology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-107**  
 Amount of Each Receipt this Period  
 60.00  
 Memo Item

**B. Ahmed, Nadim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) EVP & President of Hematology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-107**  
 Amount of Each Receipt this Period  
 60.00  
 Memo Item

**C. Bergstresser, Kendig, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Senior Product Manager, Payer Marketi  
 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  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-131**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Bergstresser, Kendig, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Senior Product Manager, Payer Market  
 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  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-131**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Bohannan, Stephanie, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) District Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-57**  
 Amount of Each Receipt this Period  
 21.00  
 Memo Item

**C. Brett, Christopher, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) VP, Global Clinical Trial Strategy & O  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-211**  
 Amount of Each Receipt this Period  
 21.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 72.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Chesmore, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Vice President, U.S. Policy & Governm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-61**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Chesmore, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Vice President, U.S. Policy & Governm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-61**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Davies, Ian, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) VP, Worldwide Hematology Value, Aces  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-225**  
 Amount of Each Receipt this Period 21.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	121.00
<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 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Fairless, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Exec. Hematology Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-94**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Fairless, Cynthia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Exec. Hematology Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-94**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Fitzpatrick, Helen, Kim, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Director, Regional Lead  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-204**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Fitzpatrick, Helen, Kim, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 86 Morris Ave

City Summit	State NJ	Zip Code 07901
----------------	-------------	-------------------

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

Name of Employer (for Individual) Celgene Corporation	Occupation (for Individual) Director, Regional Lead
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2020

**Transaction ID : 2020060222135-204**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 86 Morris Ave

City Summit	State NJ	Zip Code 07901
----------------	-------------	-------------------

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

Name of Employer (for Individual) Celgene Corporation	Occupation (for Individual) Director, Policy Communications
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2020

**Transaction ID : 2020051622136-233**

Amount of Each Receipt this Period  
26.00

Memo Item

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

Mailing Address 86 Morris Ave

City Summit	State NJ	Zip Code 07901
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Celgene Corporation	Occupation (for Individual) Director, Policy Communications
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2020

**Transaction ID : 2020060222135-233**

Amount of Each Receipt this Period  
26.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	102.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Gironda, Gayle, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) VP, HR Business Partner, Hematology :  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-247**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

**B. Gironda, Gayle, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) VP, HR Business Partner, Hematology :  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-247**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

**C. Gliha, Patrick, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Senior Director, Regional Lead  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-200**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	159.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Gliha, Patrick, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Senior Director, Regional Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt 05 / 29 / 2020  
**Transaction ID : 2020060222135-200**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. Grimm, Denise, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr. Hematology Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2020  
**Transaction ID : 2020051622136-124**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Grimm, Denise, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr. Hematology Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2020  
**Transaction ID : 2020060222135-124**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Hersey, Sarah, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Vice President, Precision Medicine  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-226**  
 Amount of Each Receipt this Period 21.00  
 Memo Item

**B. Herzog, Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Associate Director, State Government /  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-246**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**C. Herzog, Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Associate Director, State Government A  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-246**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	101.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Hussain, Rabia, Jade, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Account Manager, Cell Therapy Los An  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-147**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

**B. Hussain, Rabia, Jade, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Account Manager, Cell Therapy Los Ar  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-147**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

**C. Intfen, Eric, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Hematology Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-238**  
 Amount of Each Receipt this Period 21.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	105.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Knoth, Russell, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Group Director - US Field HEOR Nation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-253**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Kosoy, Maxim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Account Manager, Cell Therapy New Je  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-16**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Kosoy, Maxim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Account Manager, Cell Therapy New Je  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-16**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Kuczkowski, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Director, Medical Science Liaisons (MS)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-52**  
 Amount of Each Receipt this Period 21.00  
 Memo Item

**B. Leberer, Sara, T, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr. Hematology Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-138**  
 Amount of Each Receipt this Period 21.00  
 Memo Item

**C. Lydick, Sheri, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Vice President, US Ozanimod Brand Le:  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-53**  
 Amount of Each Receipt this Period 41.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	83.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 26
	<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Lydick, Sheri, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Vice President, US Ozanimod Brand Le  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-53**  
 Amount of Each Receipt this Period  
 41.00  
 Memo Item

**B. Mahoney, Jeffrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) VP, U.S. Hematology Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-32**  
 Amount of Each Receipt this Period  
 41.00  
 Memo Item

**C. Mahoney, Jeffrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) VP, U.S. Hematology Sales  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-32**  
 Amount of Each Receipt this Period  
 41.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	123.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. McDonald, Kevin, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr Manager, Warren Facilities  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-50**  
 Amount of Each Receipt this Period 41.00  
 Memo Item

**B. McDonald, Kevin, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr Manager, Warren Facilities  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-50**  
 Amount of Each Receipt this Period 41.00  
 Memo Item

**C. McFarland, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr. Hematology Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-33**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	124.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. McFarland, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr. Hematology Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-33**  
 Amount of Each Receipt this Period  
 42.00  
 Memo Item

**B. Nelson, Lisa, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Senior Director, U.S. Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-218**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item

**C. Nelson, Lisa, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Senior Director, U.S. Public Policy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-218**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	192.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Perdue, Jeffrey, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr Regional Director, Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-80**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Perdue, Jeffrey, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr Regional Director, Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-80**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Rubright, Stephen, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) 1525 Juno Therapeutics, Inc. Occupation (for Individual) Associate Director, Dual Chamber Repu  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-258**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Siegel, Dmitri, A, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 86 Morris Ave

City Summit	State NJ	Zip Code 07901
----------------	-------------	-------------------

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

Name of Employer (for Individual) Celgene Corporation	Occupation (for Individual) Associate Director, State Strategic Al
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

**Transaction ID : 2020051622136-156**

Amount of Each Receipt this Period  
41.00

Memo Item

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

Mailing Address 86 Morris Ave

City Summit	State NJ	Zip Code 07901
----------------	-------------	-------------------

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

Name of Employer (for Individual) Celgene Corporation	Occupation (for Individual) Associate Director, State Strategic Al
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

**Transaction ID : 2020060222135-156**

Amount of Each Receipt this Period  
41.00

Memo Item

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

Mailing Address 86 Morris Ave

City Summit	State NJ	Zip Code 07901
----------------	-------------	-------------------

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

Name of Employer (for Individual) Celgene Corporation	Occupation (for Individual) Sr. District Business Manager
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2020

**Transaction ID : 2020051622136-121**

Amount of Each Receipt this Period  
46.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	128.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Silvers, Deborah, Lee, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr. District Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-121**  
 Amount of Each Receipt this Period  
 46.00  
 Memo Item

**B. Solis, Guadalupe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr. National Account Exec, Spec Pharm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-39**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Solis, Guadalupe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr. National Account Exec, Spec Pharm  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-39**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	96.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Stroh, Jody, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Hematology Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 29 / 2020  
**Transaction ID : 2020060222135-77**  
 Amount of Each Receipt this Period 21.00  
 Memo Item

**B. Tucker, Winselow, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) SVP, General Manager U.S. Hematolog  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 15 / 2020  
**Transaction ID : 2020051622136-251**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Tucker, Winselow, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) SVP, General Manager U.S. Hematolog  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 29 / 2020  
**Transaction ID : 2020060222135-251**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	121.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 26
<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Valladares, Juan, Cristobal, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Senior Market Access Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-256**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Valladares, Juan, Cristobal, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Senior Market Access Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-256**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Woods, Eileen, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Senior Director Commercial Training, L  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-150**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Woods, Eileen, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Senior Director Commercial Training, L  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-150**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Yurcisin, Pamela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr. District Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-37**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Yurcisin, Pamela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Sr. District Business Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-37**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 26
	<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)  
**CELGENE CORPORATION POLITICAL ACTION COMMITTEE**

**A. Zalutko, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Exec. Hematology Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 15 / 2020  
**Transaction ID : 2020051622136-6**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Zalutko, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 Morris Ave  
 City Summit State NJ Zip Code 07901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Celgene Corporation Occupation (for Individual) Exec. Hematology Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 29 / 2020  
**Transaction ID : 2020060222135-6**  
 Amount of Each Receipt this Period  
 25.00  
 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  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2282.00