PAGE 1 / 14

Image# 201607089020382607

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	or Other Than An Aut	norized Committee	Off	fice Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, ty over the lines.	pe 12FE4M5	
Regeneron Pharmaceu	iticals, Inc. PAC			
ADDRESS (number and street)	777 Old Saw Mill River Roa	d		
Check if different				
than previously reported. (ACC)	Tarrytown		NY L	10591
2. FEC IDENTIFICATION NU	MBER ▼ CIT	ΓY ▲	STATE ▲	ZIP CODE 🛦
C C00562264		S THIS X NEW (N)	OR AMENI	DED
4. TYPE OF REPORT (Choose One)	Report Due On:		20 (M5) Aug 20 (D (M6) Sep 20 (Year Only)
(a) Quarterly Reports:	Apr	20 (M4) X Jul 20	(M7) Oct 20 (Year Only)
April 15 Quarterly Report (Q	1)			
July 15 Quarterly Report (Q	PRF-Election	Primary (12P) Convention (12C)	General (126 Special (125)	
October 15 Quarterly Report (Q:	·			
January 31 Year-End Report (YI	Election	on on	D / Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election	on on	D / Y = Y = Y	in the State of
5. Covering Period 06	01 2016	through	M = M / D = D / Y 06 30	2016
I certify that I have examined thi	s Report and to the best of	my knowledge and belief	it is true, correct and co	emplete.
Type or Print Name of Treasurer	Robert E. Landry			
Signature of Treasurer Rober	t E. Landry	[Electronically Filed	Date 07	08 / 2016
NOTE: Submission of false, errone	ous, or incomplete informatio	n may subject the person s	gning this Report to the p	enalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Regeneron Pharmaceuticals, Inc. PAC 06 01 2016 06 30 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 77551.35 January 1, 2016 (b) Cash on Hand at 75312.41 Beginning of Reporting Period..... 7626.46 32868.33 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 110419.68 82938.87 6(a) and 6(c) for Column B)..... 5833.54 33314.35 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 77105.33 77105.33 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 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)

Write or Type Committee Name

Regeneron Pharmaceuticals, Inc. PAC

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
ontributions (other than loans) From:	Total Tills Teriou	Odiciladi Tedi to Bate
•		
	7122.92	27991.34
(ii) Unitemized	70.00	2262.64
(iii) TOTAL (add		00050.00
Lines 11(a)(i) and (ii)▶	7192.92	30253.98
	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
'	0.00	0.00
	3.00	0.00
	7192.92	30253.98
	0.00	0.00
arty Commucoco		
Loans Received	0.00	0.00
	7	7
nan Renavments Received	0.00	0.00
1 1	7	7
·	433.54	2614.35
Federal Candidates and Other		
olitical Committees	0.00	0.00
ther Federal Receipts		
Dividends, Interest, etc.)	0.00	0.00
ansfers from Non-Federal and Levin Funds		
(from Schedule H3)	0.00	0.00
) Levin Funds (from Schedule H5)	0.00	0.00
_		
Total Transfers (add 18(a) and 18(b))	0.00	0.00
a oc d oc oco	a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
	ing Expenditures: located Federal/Non-Federal		Valctidat Teat-to-Date		
	ctivity (from Schedule H4)				
(i)	Federal Share	0.00	0.00		
(ii)	Non-Federal Share	0.00	0.00		
(b) O	her Federal Operating				
	penditures	433.54	2614.35		
	tal Operating Expenditures	422.54	2614.35		
	dd 21(a)(i), (a)(ii), and (b))▶ ers to Affiliated/Other Party	433.54	2014.33		
	ttees	0.00	0.00		
Contrib					
and Of	her Political Committees	5400.00	30700.00		
-	ndent Expenditures	0.00	0.00		
Coordi	chedule E) nated Party Expenditures	0.00	0.00		
(2 U.S	C. §441a(d)) chedule F)	0.00	0.00		
(300 0			7 7		
6. Loan F	Repayments Made	0.00	0.00		
		0.00	0.00		
7. Loans 8. Refunc	Mades of Contributions To:	0.00	0.00		
(a) In	dividuals/Persons Other nan Political Committees	0.00	0.00		
(b) Po	olitical Party Committees	0.00	0.00		
(-)	her Political Committees	0.00	0.00		
(S	uch as PACs)	0.00	0.00		
(d) To	tal Contribution Refunds				
` ′ (a	dd Lines 28(a), (b), and (c))▶	0.00	0.00		
9. Other	Disbursements	0.00	0.00		
n Federa	I Election Activity (2 U.S.C. §431(20))				
	located Federal Election Activity				
٠,	om Schedule H6)				
(i)	Federal Share	0.00	0.00		
/::·	"Lovin" Sharo	0.00	0.00		
	"Levin" Shareederal Election Activity Paid Entirely	3.00			
(~) '	With Federal Funds	0.00	0.00		
(c) To	tal Federal Election Activity (add				
L	ines 30(a)(i), 30(a)(ii) and 30(b)) ▶	0.00	0.00		
1 Total C	lighturgements (add Lines 21/s) 22				
	Disbursements (add Lines 21(c), 22, 25, 26, 27, 28(d), 29 and 30(c))	5022.54	33314.35		
	25, 25, 27, 25(a), 25 and 55(o))	5833.54	33314.33		
2. Total F	ederal Disbursements				
	ct Line 21(a)(ii) and Line 30(a)(ii)				
from L	ne 31)	5833.54	33314.35		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	7192.92	30253.98
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7192.92	30253.98
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	433.54	2614.35
7. Offsets to Operating Expenditures (from Line 15, page 3)	433.54	2614.35
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of Detailed Summary Pa	Y 44
		by any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc.	PAC	
Full Name (Last, First, Middle Initial) Keith Anderson Mailing Address 777 Old Saw Mill River Road		Date of Receipt
City Tarrytown	State Zip Code NY 10591	06 24 2016 Transaction ID : SA11AI.4704
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50.00
Regeneron Pharmaceuticals Inc.	occupation r. Staff Scientist oggregate Year-to-Date ▼	Memo Item \$25.00 Bi-weekly payroll deduction
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ned Braunstein Mailing Address 777 Old Saw Mill River Road	328	Date of Receipt
City Tarrytown FEC ID number of contributing federal political committee.	State Zip Code NY 10591	06 24 2016 Transaction ID : SA11AI.4715 Amount of Each Receipt this Period 384.60
Name of Employer Regeneron Pharmaceuticals Inc.	occupation r. VP - Regulatory Affairs	Memo Item \$192.30 Bi-weekly payroll deduction
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	9.90
Full Name (Last, First, Middle Initial) Scott Carver Mailing Address 777 Old Saw Mill River Road		Date of Receipt
City Tarrytown FEC ID number of contributing federal political committee.	State Zip Code NY 10591	06 24 2016 Transaction ID : SA11AI.4705 Amount of Each Receipt this Period 192.30
Regeneron Pharmaceuticals Inc.	Occupation P- Clinical Scale Mfg. & Sciences Aggregate Year-to-Date ▼ 1249	Memo Item \$96.15 Bi-weekly payroll deduction
SUBTOTAL of Receipts This Page (optional)		626.90
TOTAL This Period (last page this line number onl	/)	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 7 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and State or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc	c. PAC	
Full Name (Last, First, Middle Initial) Christopher Daly Mailing Address 777 Old Saw Mill River Road City Tarrytown FEC ID number of contributing federal political committee. Name of Employer Regeneron Pharmaceuticals Inc. Receipt For: Primary General Other (specify)	State Zip Code NY 10591 C Occupation Director - Oncology & Angiogenesis Aggregate Year-to-Date ▼ 1249.95	Date of Receipt 06 24 2016 Transaction ID: SA11AI.4703 Amount of Each Receipt this Period 192.30 Memo Item \$96.15 Bi-weekly payroll deduction
Full Name (Last, First, Middle Initial) Jeanette Fairhurst Mailing Address 777 Old Saw Mill River Road City Tarrytown FEC ID number of contributing federal political committee. Name of Employer Regeneron Pharmaceuticals Inc. Receipt For: Primary General Other (specify)	State Zip Code NY 10591 C Occupation Senior Manager-Therapeutic Antibodies Aggregate Year-to-Date ▼ 650.00	Date of Receipt 06 24 2016 Transaction ID: SA11AI.4712 Amount of Each Receipt this Period 100.00 Memo Item \$50.00 Bi-weekly payroll deduction
Full Name (Last, First, Middle Initial) Chris Fenimore Mailing Address 777 Old Saw Mill River Road City Tarrytown FEC ID number of contributing federal political committee. Name of Employer Regeneron Pharmaceuticals Inc. Receipt For: Primary General Other (specify)	State Zip Code NY 10591 C Occupation VP - Financial Planning Aggregate Year-to-Date ▼ 1249.95	Date of Receipt 06 24 2016 Transaction ID: SA11AI.4710 Amount of Each Receipt this Period 192.30 Memo Item \$96.15 Bi-weekly payroll deduction
SUBTOTAL of Receipts This Page (optional)		484.60
TOTAL This Period (last page this line number o	nly)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOF	R LINE	NU	MBER	:	PAGE	:	8	OF	14
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
,g.		13		14		15		16		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) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) Gregory Geba Date of Receipt Mailing Address 777 Old Saw Mill River Road 2016 24 City Zip Code State Transaction ID: SA11AI.4717 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 76.92 federal political committee. Memo Item Name of Employer Occupation \$38.46 Bi-weekly payroll deduction VP Deputy Head - Clinical Development Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 499.98 Other (specify) Full Name (Last, First, Middle Initial) **B.** Patrice Gilooly Date of Receipt Mailing Address 777 Old Saw Mill River Road 06 24 2016 City State Zip Code Transaction ID: SA11AI.4718 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 192.30 federal political committee. Memo Item Name of Employer Occupation Regeneron Pharmaceuticals Inc. \$96.15 Bi-weekly payroll deduction VP - QA & Operations Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1249.95 Full Name (Last, First, Middle Initial) c. Joseph LaRosa Date of Receipt Mailing Address 777 Old Saw Mill River Road 06 24 2016 City State Zip Code Transaction ID: SA11AI.4707 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing С 384.60 federal political committee. Memo Item Name of Employer Occupation \$192.30 Bi-weekly payroll deduction Regeneron Pharmaceuticals Inc. Sr. VP - General Counsel & Secretary Receipt For: Aggregate Year-to-Date ▼ Primary General 2499.90 Other (specify) 653.82 SUBTOTAL of Receipts This Page (optional).....

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

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 9 OF Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Sta or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc	c. PAC	
Full Name (Last, First, Middle Initial) Scott Mellis Mailing Address 777 Old Saw Mill River Road City Tarrytown FEC ID number of contributing federal political committee. Name of Employer Regeneron Pharmaceuticals Inc. Receipt For: Primary General Other (specify)	State Zip Code NY 10591 C Occupation VP - Clinical Sciences Trans. Medicine Aggregate Year-to-Date ▼ 2499.90	Date of Receipt 06 24 2016 Transaction ID: SA11AI.4702 Amount of Each Receipt this Period 384.60 Memo Item \$192.30 Bi-weekly payroll deduction
Full Name (Last, First, Middle Initial) Hala Mirza Mailing Address 777 Old Saw Mill River Road City Tarrytown FEC ID number of contributing federal political committee. Name of Employer Regeneron Pharmaceuticals Inc. Receipt For: Primary General Other (specify) ▼	State Zip Code NY 10591 C Occupation VP - Corporate Communications Aggregate Year-to-Date ▼ 2499.90	Date of Receipt 06 24 2016 Transaction ID: SA11AI.4701 Amount of Each Receipt this Period 384.60 Memo Item \$192.30 Bi-weekly payroll deduction
Full Name (Last, First, Middle Initial) Andrew Murphy Mailing Address 777 Old Saw Mill River Road City Tarrytown FEC ID number of contributing federal political committee. Name of Employer Regeneron Pharmaceuticals Inc. Receipt For: Primary General Other (specify)	State Zip Code NY 10591 C Occupation Sr. VP - Research Regeneron Labs Aggregate Year-to-Date ▼ 2499.90	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		1153.80
TOTAL This Period (last page this line number o	nly)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Harana and a sala adula (a)	TOTAL MONIBERT								14	
Use separate schedule(s) for each category of the	`	ck only	or	ne)		ì		i		
Detailed Summary Page	<u> </u> ×	11a		11b		11c		12		
		13		14		15		16		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) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) William Olson Date of Receipt Mailing Address 777 Old Saw Mill River Road 2016 24 City State Zip Code Transaction ID: SA11AI.4706 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 384.60 federal political committee. Memo Item Name of Employer Occupation \$192.30 Bi-weekly payroll deduction VP - Research & Development Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 2499.90 Other (specify) Full Name (Last, First, Middle Initial) B. Christine Poon Date of Receipt Mailing Address 777 Old Saw Mill River Road 06 13 2016 City State Zip Code Transaction ID: SA11AI.4722 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 3000.00 federal political committee. Memo Item Name of Employer Occupation Independent Director Independent Director, Board of Dir Receipt For: Aggregate Year-to-Date ▼ Primary General 3000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Tor Smeland Date of Receipt Mailing Address 777 Old Saw Mill River Road 06 24 2016 City State Zip Code Transaction ID: SA11AI.4714 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing С 384.60 federal political committee. Memo Item Name of Employer Occupation \$192.30 Bi-weekly payroll deduction Regeneron Pharmaceuticals Inc. Exec. Dir. - Assistant General Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 2499.90 Other (specify) 3769.20 SUBTOTAL of Receipts This Page (optional).....

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FO	R LINE	NU	MBER	:	PAGE	1	11 OF	14
Use separate schedule(s) for each category of the	(check only one)								
Detailed Summary Page	>	11a		11b		11c		12	
		13		14		15		16	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) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) Robert Vitti Date of Receipt Mailing Address 777 Old Saw Mill River Road 2016 24 City Zip Code State Transaction ID: SA11AI.4720 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing C 192.30 federal political committee. Memo Item Name of Employer Occupation \$96.15 Bi-weekly payroll deduction VP Clinical Sciences - Ophthalmology Regeneron Pharmaceuticals Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1249.95 Other (specify) Full Name (Last, First, Middle Initial) B. Mark Volpe Date of Receipt Mailing Address 777 Old Saw Mill River Road 06 24 2016 City State Zip Code Transaction ID: SA11AI.4708 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing 192.30 federal political committee. Memo Item Name of Employer Occupation Regeneron Pharmaceuticals Inc. \$96.15 Bi-weekly payroll deduction Vice President - Taxes Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1249.95 Full Name (Last, First, Middle Initial) c. Stephen Westing Date of Receipt Mailing Address 777 Old Saw Mill River Road 06 24 2016 City Zip Code State Transaction ID: SA11AI.4719 NY Tarrytown 10591 Amount of Each Receipt this Period FEC ID number of contributing С 50.00 federal political committee. Memo Item Name of Employer Occupation \$25.00 Bi-weekly payroll deduction Regeneron Pharmaceuticals Inc. Dir. Med Aff. - Opthalmology Sciences Receipt For: Aggregate Year-to-Date ▼ Primary General 325.00 Other (specify) 434.60 SUBTOTAL of Receipts This Page (optional).....

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

7122.92

SCHEDULE A (FEC Form 3X)	IEDULE A (FEC Form 3X) Use separate schedule(s)	
TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) 11a 11b 11c 12 13 14 X 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the r NAME OF COMMITTEE (In Full)		rson for the purpose of soliciting contributions
Regeneron Pharmaceuticals, Inc	e. PAC	
Full Name (Last, First, Middle Initial) Regeneron Pharmaceuticals, Inc. PAC Mailing Address 777 Old Saw Mill River Road City Torrectour	State Zip Code NY 10591	Date of Receipt 06 22 2016 Transaction ID : SA15.4724
Tarrytown FEC ID number of contributing federal political committee.	C C00562264	Amount of Each Receipt this Period 433.54
Name of Employer	Occupation	Reimbursement of Expenses - Bank fees
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 433.54	
Full Name (Last, First, Middle Initial) 8. Moiling Address		Date of Receipt
Mailing Address City	State Zip Code	M = M / D = D / Y = Y = Y
FEC ID number of contributing federal political committee. Name of Employer	Occupation	Amount of Each Receipt this Period Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address City	State Zip Code	M M / D D / Y Y Y Y Y
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period Memo Item
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)	>	433.54
TOTAL This Period (last page this line number or	·	433.54

SCHEDULE B (FEC Form 3X)	Llea concrete achadula/-\	FOR LINE	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only X 21b 27	one) 22 23 24 25 26 28a 28b 28c 29 30
Any information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) Regeneron Pharmaceuticals, Inc. F		ar committee to	Solicit contributions from Such committee.
Full Name (Last, First, Middle Initial)			B (B)
A. JP Morgan Chase Bank, NA			Date of Disbursement
Mailing Address Two Corporate Drive			06 15 2016
Shelton	State Zip Code CT 06484		Transaction ID : SB21B.4730
Purpose of Disbursement Bank fees		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	433.54
	nent For: Primary General Other (specify) ▼	Туре	Memo Item
State: District:			
Full Name (Last, First, Middle Initial) B.			Date of Disbursement
Mailing Address			M = M / D = D / Y = Y = Y = Y
City	State Zip Code		
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
President	nent For: Primary General Other (specify) ▼	71.1	Memo Item
State: District: Full Name (Last, First, Middle Initial)			
C.			Date of Disbursement
Mailing Address			
City	State Zip Code		
Purpose of Disbursement			
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
	nent For: Primary General Other (specify) ▼	1,7,00	Memo Item
SUBTOTAL of Disbursements This Page (optional)			433.54
			433.54
TOTAL This Period (last page this line number only).			100.01

tor each category of the botterist grant of the control category of the categ	SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE	
ANAME OF COMMITTEE (in Full) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) ANNAE SHOO FOR CONGRESS Mailing Address 555 CAPITOL MALL, SUITE 1425 City State Zip Code SACRAMENTO CA 95814 Purpose of Disbursement Political contribution Clandidate Name ANNAE SHOO FOR CONGRESS Office Sought: House Disbursement Political contribution Date of Disbursement Date of D	IIEMIZED DISBURSEMENTS	for each category of the	21b	22 🗙 23 🔲 24 🔲 25 🖂 26
NAME OF COMMITTEE (in Full) Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) ANNA ESHOO FOR CONGRESS Mailing Address 555 CAPITOL MALL SUITE 1425 City State Zip Code SACRAMENTO CA 95814 Prupose of Disbursement Political contribution Cardidate Name ANNA ESHOO FOR CONGRESS Office Sought: House Disbursement For: 2016 Senate Primary General Primary				
Regeneron Pharmaceuticals, Inc. PAC Full Name (Last, First, Middle Initial) ANNA ESHOO FOR CONGRESS Mailing Address 655 CAPITOL MALL, SUITE 1425 City State Zip Code CA 95814 Purpose of Disbursement Portical contribution Candidate Name RICHARD BURR COMMITTEE; THE Name (Last, First, Middle Initial) State: NC Disfort: 0 Disbursement Politocal contribution Office Sought: House Disbursement Politocal contribution Office Sought: Purpose of Disbursement Politocal contribution Office Sought: House Disbursement For: 2016 Primary General Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type District: 00 Dist		is and address of any point	ioai oominiittee to	const continuations from such confinitee.
Malling Address 556 CAPITOL MALL, SUITE 1425 City State Zip Code CA 95814 Purpose of Disbursement Political contribution Candidate Name ANNA ESHOO FOR CONGRESS Office Sought: Yesident State Zip Code Candidate Name President State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) Malling Address City State Zip Code WinsTon-Sallem NC 27113 Furpose of Disbursement Post: 2016 Category/ Type	Regeneron Pharmaceuticals, Inc. F	PAC		
Mailing Address 555 CAPITOL MALL, SUITE 1425 City City State City State City State City State City State City City City State City ANNA ESHOO FOR CONGRESS Office Sought: All House City Winston-Salem City Winston-Salem City Winston-Salem City Winston-Salem City Winston-Salem City Winston-Salem City State City City State City City State City City City State City Cit	_			Date of Dishursament
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SACRAMENTO CA 95814 Purpose of Disbursement Political Sought: Name RICHARD BURR COMMITTEE; THE RICHARD BURR COMMITTEE; THE Office Sought: Senate President State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 Full Name (Last, First, Middle Initial) State: NC District: 00 State: Senate Primary General Other (specify) Memoltem State: NC Memoltem State: NC District: 00 State: Senate Primary General Other (specify) Memoltem State: Senate Primary General Other (specify) State: Senate Primary General Other (specify) State: Senate Primary General Other (specify) State: State: Senate Primary General Other (specify) State: St	Mailing Address 555 CAPITOL MALL, SUITE 1425			
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ANNA ESHOO FOR CONGRESS Office Sought:	Purpose of Disbursement	33014		
ANNA ESHOO FOR CONGRESS Office Sought: House Disbursement For: 2016 Memo Item President Pres			011	Amount of Each Disbursement this Period
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State: CA District: 18 Full Name (Last, First, Middle Initial) RICHARD BURR COMMITTEE; THE Mailing Address POST OFFICE BOX 5928 City State Zip Code NC 27113 Purpose of Disbursement Political contribution Candidate Name RICHARD BURR COMMITTEE; THE Office Sought: House Prisident Senate Primary General Other (specify) Memo Item Mailing Address City State Zip Code NC 27113 Transaction ID: SB23.4725 Amount of Each Disbursement this Period Amount of Each Disbursement this Period Type Office Sought: Primary General Other (specify) Memo Item Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Primary General Other (specify) Memo Item Mailing Address City State Zip Code Purpose of Disbursement Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item Amount of Each Disbursement this Period	Office Sought: House Disburser Senate	Primary Seneral	1,400	Memo Item
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WINSTON-SALEM Purpose of Disbursement Political contribution Candidate Name RICHARD BURR COMMITTEE; THE Office Sought: House Primary Other (specify) Full Name (Last, First, Middle Initial) Category/ Type Office Sought: Mailing Address City State Candidate Name Category/ Type Disbursement Category/ Type Amount of Each Disbursement this Period Date of Disbursement Amount of Each Disbursement Date of Disbursement Amount of Each Disbursement Amount of Each Disbursement Date of Disbursement Amount of Each Disbursement Mailing Address City State Category/ Type Office Sought: House Senate Primary General Other (specify) Frimary General Other (specify) Other (specify) State: Disbursement This Page (optional) Substortal of Disbursements This Page (optional)				
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Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Category/ Type Office Sought: House Senate Primary General President President Other (specify) ▼ State: District: Substruct: Disbursements This Page (optional)				
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Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) State: District: Substotal of Disbursements This Page (optional)	Mailing Address			/ /
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SOBTOTAL OF DISDUISEMENTS THIS Tage (Optional)	Senate President	Primary General	1,900	
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