

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 Regeneron Pharmaceuticals, Inc. PAC

ADDRESS (number and street) 777 Old Saw Mill River Road Tarrytown NY 10591

2. FEC IDENTIFICATION NUMBER C C00562264 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2017 through 07 31 2017

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

Signature of Treasurer Landry, Robert, E., [Electronically Filed] Date 08 15 2017

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

**Regeneron Pharmaceuticals, Inc. PAC**

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

|  | COLUMN A<br>This Period                | COLUMN B<br>Calendar Year-to-Date      |
|--|--|--|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2017"/>  | <input type="text" value="58959.31"/>  | <input type="text" value="58959.31"/>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="104216.26"/> |  |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="8915.45"/>   | <input type="text" value="59921.85"/>  |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="113131.71"/> | <input type="text" value="118881.16"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="13634.95"/>  | <input type="text" value="19384.40"/>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="99496.76"/>  | <input type="text" value="99496.76"/>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>      |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Regeneron Pharmaceuticals, Inc. PAC**

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

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 8310.50                       | 53736.81                          |
| (ii) Unitemized .....   | 270.00                        | 3800.64                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 8580.50                       | 57537.45                          |
| (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) .....  | 8580.50                       | 57537.45                          |
| 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)..... | 334.95                        | 2384.40                           |
| 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)).....▶                         | 8915.45                       | 59921.85                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 8915.45                       | 59921.85                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 334.95                        | 2384.40                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 334.95                        | 2384.40                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 13300.00                      | 17000.00                          |
| 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)) ..      | 13634.95                      | 19384.40                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 13634.95                      | 19384.40                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 8580.50                               | 57537.45                                  |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 8580.50                               | 57537.45                                  |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 334.95                                | 2384.40                                   |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 334.95                                | 2384.40                                   |
| 38. Net Operating Expenditures<br>(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 19  |
| <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)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. Anderson, Keith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. Staff Scientist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5149**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 \$25 Bi-weekly payroll deduction

**B. Bermingham, Maya, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Gov. Affairs & Public Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5172**  
 Amount of Each Receipt this Period 384.00  
 Memo Item  
 \$192 Bi-weekly payroll deduction

**C. Braunstein, Ned, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - Regulatory Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2883.96

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5175**  
 Amount of Each Receipt this Period 384.00  
 Memo Item  
 \$192 Bi-weekly payroll deduction

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 818.00 |
| <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 19  |
| <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)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. Carver, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP- Clinical Scale Mfg. & Sciences  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1442.30

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5150**  
 Amount of Each Receipt this Period 192.31  
 Memo Item  
 Bi-weekly payroll deductions of \$96.16 & \$96.15

**B. Daly, Christopher, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. Director - Oncology & Angiogenesis  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1442.30

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5148**  
 Amount of Each Receipt this Period 192.31  
 Memo Item  
 Bi-weekly payroll deductions of \$96.16 & \$96.15

**C. Daly, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - Preclin. Devt & Protein Chem  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5161**  
 Amount of Each Receipt this Period 384.00  
 Memo Item  
 \$192 Bi-weekly payroll deduction

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 768.62 |
| <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 19  |
| <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)  
**Regeneron Pharmaceuticals, Inc. PAC**

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

Mailing Address 777 Old Saw Mill River Road

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Tarrytown | State<br>NY | Zip Code<br>10591 |
|-------------------|-------------|-------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>Regeneron Pharmaceuticals Inc. | Occupation (for Individual)<br>Senior Manager-Therapeutic Antibodies |
|---|--|

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 |
| 07    | / | 21    | / | 2017        |

**Transaction ID : SA11AI.5156**

Amount of Each Receipt this Period  
100.00

Memo Item  
\$50 Bi-weekly payroll deduction

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

Mailing Address 777 Old Saw Mill River Road

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Tarrytown | State<br>NY | Zip Code<br>10591 |
|-------------------|-------------|-------------------|

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

|   |   |
|---|---|
| Name of Employer (for Individual)<br>Regeneron Pharmaceuticals Inc. | Occupation (for Individual)<br>Senior Vice President, Protein Express |
|---|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
768.31

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 21    | / | 2017        |

**Transaction ID : SA11AI.5159**

Amount of Each Receipt this Period  
384.00

Memo Item  
\$192 Bi-weekly payroll deduction

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

Mailing Address 777 Old Saw Mill River Road

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Tarrytown | State<br>NY | Zip Code<br>10591 |
|-------------------|-------------|-------------------|

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

|   |   |
|---|---|
| Name of Employer (for Individual)<br>Regeneron Pharmaceuticals Inc. | Occupation (for Individual)<br>VP-Controller - Financial Planning |
|---|---|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1442.30

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 21    | / | 2017        |

**Transaction ID : SA11AI.5155**

Amount of Each Receipt this Period  
192.31

Memo Item  
Bi-weekly payroll deductions of \$96.16 & \$96.15

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 676.31 |
| <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 19 |
|   | <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)  
**Regeneron Pharmaceuticals, Inc. PAC**

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

Mailing Address 777 Old Saw Mill River Road

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Tarrytown | State<br>NY | Zip Code<br>10591 |
|-------------------|-------------|-------------------|

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

|   |  |
|---|--|
| Name of Employer (for Individual)<br>Regeneron Pharmaceuticals Inc. | Occupation (for Individual)<br>VP Deputy Head - Clinical Development |
|---|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
576.90

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 21    |   | 2017        |

**Transaction ID : SA11AI.5180**

Amount of Each Receipt this Period  
76.92

Memo Item  
\$38.46 Bi-weekly payroll deduction

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

Mailing Address 777 Old Saw Mill River Road

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Tarrytown | State<br>NY | Zip Code<br>10591 |
|-------------------|-------------|-------------------|

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

|   |   |
|---|---|
| Name of Employer (for Individual)<br>Regeneron Pharmaceuticals Inc. | Occupation (for Individual)<br>VP - QA & Operations |
|---|---|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1442.30

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 21    |   | 2017        |

**Transaction ID : SA11AI.5181**

Amount of Each Receipt this Period  
192.31

Memo Item  
Bi-weekly payroll deductions of \$96.16 & \$96.15

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

Mailing Address 777 Old Saw Mill River Road

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>Tarrytown | State<br>NY | Zip Code<br>10591 |
|-------------------|-------------|-------------------|

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

|   |   |
|---|---|
| Name of Employer (for Individual)<br>Regeneron Pharmaceuticals Inc. | Occupation (for Individual)<br>Associate Director, Government Affairs |
|---|---|

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 12    |   | 2017        |

**Transaction ID : SA11AI.5199**

Amount of Each Receipt this Period  
1000.00

Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1269.23 |
| <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 19                |
|   | <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)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. LaRosa, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - General Counsel & Secretary  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2884.58

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5152**  
 Amount of Each Receipt this Period 384.62  
 Memo Item  
 \$192.31 Bi-weekly payroll deduction

**B. Levine, Beth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - Assoc. General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5158**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 \$50 Bi-weekly payroll deduction

**C. Markowitz, Jay, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Senior Vice President - Portfolio Mgmt  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5166**  
 Amount of Each Receipt this Period 384.00  
 Memo Item  
 \$192 Bi-weekly payroll deduction

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 868.62 |
| <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 19   |
| <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)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. Mellis, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Clinical Sciences Trans. Medicine  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2884.58

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5178**  
 Amount of Each Receipt this Period 384.62  
 Memo Item  
 \$192.31 Bi-weekly payroll deduction

**B. Mirza, Hala, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Corporate Communications  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2884.58

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5147**  
 Amount of Each Receipt this Period 384.62  
 Memo Item  
 \$192.31 Bi-weekly payroll deduction

**C. Murphy, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - Research Regeneron Labs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2884.58

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5183**  
 Amount of Each Receipt this Period 384.62  
 Memo Item  
 \$192.31 Bi-weekly payroll deduction

**SUBTOTAL** of Receipts This Page (optional).....▶ 1153.86  
**TOTAL** This Period (last page this line number only).....▶

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

|   |                              |                                   |   |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page |                              | FOR LINE NUMBER: (check only one) | PAGE 12 OF 19   |
| <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)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. Olson, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Research & Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2884.58

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5151**  
 Amount of Each Receipt this Period 384.62  
 Memo Item  
 \$192.31 Bi-weekly payroll deduction

**B. Paull, Sally, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. Vice President - Human Resources  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5164**  
 Amount of Each Receipt this Period 384.00  
 Memo Item  
 \$192 Bi-weekly payroll deduction

**C. Ruddy, Marcella, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Early Clinical Devt & Experimenta  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 576.00

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5163**  
 Amount of Each Receipt this Period 384.00  
 Memo Item  
 \$192 Bi-weekly payroll deduction

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 1152.62 |
| <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 19 |
|   | <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)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. Smeland, Tor, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Exec. Dir. - Assistant General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2884.58

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5174**  
 Amount of Each Receipt this Period 384.62  
 Memo Item  
 \$192.31 Bi-weekly payroll deduction

**B. Soo, Yuhwen, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP Biostatistics and Data Mgmt, Clinic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 384.00

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5173**  
 Amount of Each Receipt this Period 384.00  
 Memo Item  
 \$192 Bi-weekly payroll deduction

**C. Thurston, Olin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Vice President - Oncology & Angiogene  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5165**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 \$100 Bi-weekly payroll deduction

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 968.62 |
| <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 19   |
| <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)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. Vitti, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP Clinical Sciences - Ophthalmology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1442.30

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5182**  
 Amount of Each Receipt this Period 192.31  
 Memo Item  
 Bi-weekly payroll deductions of \$96.16 & \$96.15

**B. Volpe, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Vice President - Taxes  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1442.30

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5153**  
 Amount of Each Receipt this Period 192.31  
 Memo Item  
 Bi-weekly payroll deductions of \$96.16 & \$96.15

**C. Westing, Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Old Saw Mill River Road  
 City Tarrytown State NY Zip Code 10591  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Dir. Med Aff. - Ophthalmology Sciences  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 07 / 21 / 2017  
**Transaction ID : SA11AI.5176**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 \$25 Bi-weekly payroll deduction

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 434.62 |
| <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 15 OF 19  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Regeneron Pharmaceuticals, Inc. PAC**

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

Mailing Address **777 Old Saw Mill River Road**

City **Tarrytown**    State **NY**    Zip Code **10591**

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

Name of Employer (for Individual) **Regeneron Pharmaceuticals Inc.**    Occupation (for Individual) **VP - Functional Genomics and Chief VC**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
**07 / 21 / 2017**

**Transaction ID : SA11A1.5162**

Amount of Each Receipt this Period  
**200.00**

Memo Item  
**\$100 Bi-weekly payroll deduction**

**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

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

Memo Item

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>200.00</b>  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <b>8310.50</b> |

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

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

FOR LINE NUMBER: PAGE 16 OF 19  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Regeneron Pharmaceuticals, Inc.**

Mailing Address 777 Old Saw Mill River Road

City Tarrytown State NY Zip Code 10591

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 ▼  
 658.27

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 21 / 2017

**Transaction ID : SA15.5198**

Amount of Each Receipt this Period  
 334.95

Memo Item  
 Reimbursement of Expenses - Bank Fees

**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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 334.95 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 334.95 |



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

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

FOR LINE NUMBER:  
(check only one)

|   |                              |                              |                             |                              |
|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 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)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. JP Morgan Chase Bank, NA**

Full Name (Last, First, Middle Initial)

Mailing Address Two Corporate Drive

City Shelton State CT Zip Code 06484

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 07 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5197

Amount of Each Disbursement this Period: 334.95

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....▶      | 334.95 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 334.95 |

**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)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. HATCH ELECTION COMMITTEE INC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 3986

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 05    |   | 2017      |

City WASHINGTON State DC Zip Code 20027

FEC Identification Number

Purpose of Disbursement  
Political Contribution

**C** C00104752

Candidate Name  
**HATCH, ORRIN G, , ,**

**011**  
Category/  
Type

**Transaction ID : SB23.5184**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: UT District: 00

1000.00

Memo Item

**B. IMPACT**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 192 LEXINGTON AVE.  
SUITE 1001

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 18    |   | 2017      |

City NEW YORK State NY Zip Code 10016

FEC Identification Number

Purpose of Disbursement  
Political Contribution

**C** C00348607

Candidate Name

**011**  
Category/  
Type

**Transaction ID : SB23.5194**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

5000.00

Memo Item

**C. NEW PIONEERS PAC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 228 S WASHINGTON ST STE 115

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 05    |   | 2017      |

City ALEXANDRIA State VA Zip Code 22314

FEC Identification Number

Purpose of Disbursement  
Political Contribution

**C** C00459123

Candidate Name

**011**  
Category/  
Type

**Transaction ID : SB23.5187**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

3000.00

Memo Item

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

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

|         |
|---------|
| 9000.00 |
|         |

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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <input 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)  
**Regeneron Pharmaceuticals, Inc. PAC**

**A. NITA LOWEY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 271

City White Plains State NY Zip Code 10605

Purpose of Disbursement Political Contribution

011  
Category/Type

Candidate Name  
**LOWEY, NITA M, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: NY District: 17

Date of Disbursement

MM / DD / YYYY  
07 / 13 / 2017

FEC Identification Number

C00219881

**Transaction ID : SB23.5189**

Amount of Each Disbursement this Period

1000.00

Memo Item

**B. PAUL TONKO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 911 CENTRAL AVENUE # 221

City ALBANY State NY Zip Code 12206

Purpose of Disbursement Political Contribution

011  
Category/Type

Candidate Name  
**TONKO, PAUL DAVID, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: NY District: 20

Date of Disbursement

MM / DD / YYYY  
07 / 13 / 2017

FEC Identification Number

C00450049

**Transaction ID : SB23.5190**

Amount of Each Disbursement this Period

1000.00

Memo Item

**C. REPUBLICAN MAINSTREET PARTNERSHIP PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 1300 Pennsylvania Avenue Box 190, Number 323

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement Political Contribution

011  
Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 18 / 2017

FEC Identification Number

C00165159

**Transaction ID : SB23.5193**

Amount of Each Disbursement this Period

2300.00

Memo Item

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

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

4300.00  
13300.00