

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 Astellas US LLC PAC (Astellas PAC)

ADDRESS (number and street) 1 Astellas Way Northbrook IL 60062

2. FEC IDENTIFICATION NUMBER C C00444885 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 08 / 21 / 2014 through 09 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Magdalena Lagowski

Signature of Treasurer Magdalena Lagowski [Electronically Filed] Date 10 / 10 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Astellas US LLC PAC (Astellas PAC)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="157446.63"/>	<input type="text" value="157446.63"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="93466.02"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="15568.59"/>	<input type="text" value="102863.42"/>
(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="109034.61"/>	<input type="text" value="260310.05"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6000.00"/>	<input type="text" value="157275.44"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="103034.61"/>	<input type="text" value="103034.61"/>
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

Astellas US LLC PAC (Astellas PAC)

Report Covering the Period: From: 08 / 21 / 2014 To: 09 / 30 / 2014

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).....	11111.87	58253.59
(ii) Unitemized .....	4456.72	44609.83
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	15568.59	102863.42
(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) .....	15568.59	102863.42
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	15568.59	102863.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	15568.59	102863.42

**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
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	525.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	525.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	128500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 .....	5000.00	28250.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	6000.00	157275.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6000.00	157275.44

**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
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	15568.59	102863.42
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15568.59	102863.42
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	525.44
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	525.44

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 106
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Athanasios Agouridis**  
Full Name (Last, First, Middle Initial)

Mailing Address 3201 Milton Ave

City Dallas State TX Zip Code 75205

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

Name of Employer Astellas Pharma US Inc Occupation Sr Sales Director PCP - Specialty

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : A2014-1927821**

Amount of Each Receipt this Period  
**30.00**

**B. Athanasios Agouridis**  
Full Name (Last, First, Middle Initial)

Mailing Address 3201 Milton Ave

City Dallas State TX Zip Code 75205

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

Name of Employer Astellas Pharma US Inc Occupation Sr Sales Director PCP - Specialty

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **570.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 12 / 2014**

**Transaction ID : A2014-2139118**

Amount of Each Receipt this Period  
**30.00**

**C. Athanasios Agouridis**  
Full Name (Last, First, Middle Initial)

Mailing Address 3201 Milton Ave

City Dallas State TX Zip Code 75205

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

Name of Employer Astellas Pharma US Inc Occupation Sr Sales Director PCP - Specialty

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  
**09 / 26 / 2014**

**Transaction ID : A2014-2139119**

Amount of Each Receipt this Period  
**30.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>90.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI  
Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 8 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Kenneth Aladeen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 96 Ronan Road  
 City Highwood State IL Zip Code 60040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ASTELLAS US TECHNOLOGIES Occupation President AUST President APT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927790**  
 Amount of Each Receipt this Period  
 20.00

**B. Kenneth Aladeen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 96 Ronan Road  
 City Highwood State IL Zip Code 60040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ASTELLAS US TECHNOLOGIES Occupation President AUST President APT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139055**  
 Amount of Each Receipt this Period  
 20.00

**C. Kenneth Aladeen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 96 Ronan Road  
 City Highwood State IL Zip Code 60040  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ASTELLAS US TECHNOLOGIES Occupation President AUST President APT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2139054**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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: PAGE 9 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Vikki Andersen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3014 Cherum St.  
 City Las Vegas State NV Zip Code 89135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Prof Rep II PCP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927939**  
 Amount of Each Receipt this Period  
 15.00

**B. Vikki Andersen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3014 Cherum St.  
 City Las Vegas State NV Zip Code 89135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Prof Rep II PCP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139355**  
 Amount of Each Receipt this Period  
 15.00

**C. Vikki Andersen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3014 Cherum St.  
 City Las Vegas State NV Zip Code 89135  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Prof Rep II PCP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2139354**  
 Amount of Each Receipt this Period  
 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.00  
**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: PAGE 10 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. James Anderson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1255 N Greenview Av  
 City Chicago State IL Zip Code 60642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ASTELLAS US LLC Occupation Director Commercial Technology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927856**  
 Amount of Each Receipt this Period  
 20.00

**B. James Anderson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1255 N Greenview Av  
 City Chicago State IL Zip Code 60642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ASTELLAS US LLC Occupation Director Commercial Technology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139190**  
 Amount of Each Receipt this Period  
 20.00

**C. James Anderson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1255 N Greenview Av  
 City Chicago State IL Zip Code 60642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ASTELLAS US LLC Occupation Director Commercial Technology  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139189**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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: PAGE 11 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Jeff Anderson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4209 Cave Cove Court  
 City State Zip Code  
 Keller TX 76248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Executive Representative I Hospi  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 387.93

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1928026**  
 Amount of Each Receipt this Period  
 22.16

**B. Jeff Anderson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4209 Cave Cove Court  
 City State Zip Code  
 Keller TX 76248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Executive Representative I Hospi  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 410.09

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139536**  
 Amount of Each Receipt this Period  
 22.16

**C. Jeff Anderson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4209 Cave Cove Court  
 City State Zip Code  
 Keller TX 76248  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Executive Representative I Hospi  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 432.25

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2139537**  
 Amount of Each Receipt this Period  
 22.16

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 66.48  
**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: PAGE 12 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Melissa Banashak**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6428 Hollins Drive  
 City Bethesda State MD Zip Code 20817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Asc Federal Government Affairs Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1045.70

Date of Receipt 08 / 29 / 2014  
**Transaction ID : A2014-1927972**  
 Amount of Each Receipt this Period 58.60

**B. Melissa Banashak**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6428 Hollins Drive  
 City Bethesda State MD Zip Code 20817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Asc Federal Government Affairs Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1104.30

Date of Receipt 09 / 12 / 2014  
**Transaction ID : A2014-2139428**  
 Amount of Each Receipt this Period 58.60

**C. Melissa Banashak**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6428 Hollins Drive  
 City Bethesda State MD Zip Code 20817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Asc Federal Government Affairs Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt 09 / 26 / 2014  
**Transaction ID : A2014-2139429**  
 Amount of Each Receipt this Period -29.30

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 87.90  
**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: PAGE 13 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. John Barnes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29845 Gregor St  
 City Daphne State AL Zip Code 36526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Exec Rep I Oncology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927952**  
 Amount of Each Receipt this Period  
 20.00

**B. John Barnes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29845 Gregor St  
 City Daphne State AL Zip Code 36526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Exec Rep I Oncology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139382**  
 Amount of Each Receipt this Period  
 20.00

**C. John Barnes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 29845 Gregor St  
 City Daphne State AL Zip Code 36526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Exec Rep I Oncology  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139383**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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: PAGE 14 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial)  
**A. James Barry**

Mailing Address 1811 A West Berwyn Avenue

City State Zip Code  
 Chicago IL 60640

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

Name of Employer Occupation  
 Astellas Pharma US Inc Asc Marketing Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927798**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**B. James Barry**

Mailing Address 1811 A West Berwyn Avenue

City State Zip Code  
 Chicago IL 60640

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

Name of Employer Occupation  
 Astellas Pharma US Inc Asc Marketing Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139070**

Amount of Each Receipt this Period  
 20.00

Full Name (Last, First, Middle Initial)  
**C. James Barry**

Mailing Address 1811 A West Berwyn Avenue

City State Zip Code  
 Chicago IL 60640

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

Name of Employer Occupation  
 Astellas Pharma US Inc Asc Marketing Director

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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139071**

Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00

**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: PAGE 15 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. James Beasley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 Stanton Hall Road  
 City State Zip Code  
 Collierville TN 38017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Regional Sales Mgr Hospital  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 360.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927787**  
 Amount of Each Receipt this Period  
 20.00

**B. James Beasley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 Stanton Hall Road  
 City State Zip Code  
 Collierville TN 38017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Regional Sales Mgr Hospital  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139048**  
 Amount of Each Receipt this Period  
 20.00

**C. James Beasley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1101 Stanton Hall Road  
 City State Zip Code  
 Collierville TN 38017  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Regional Sales Mgr Hospital  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2139049**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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: PAGE 16 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Diana Blanton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8515 Ashton PI NE  
 City Albuquerque State NM Zip Code 87122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Regional Account Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 610.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927910**  
 Amount of Each Receipt this Period  
 20.00

**B. Diana Blanton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8515 Ashton PI NE  
 City Albuquerque State NM Zip Code 87122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Regional Account Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139296**  
 Amount of Each Receipt this Period  
 20.00

**C. Diana Blanton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8515 Ashton PI NE  
 City Albuquerque State NM Zip Code 87122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Regional Account Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2139297**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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: PAGE 17 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Jay Blind**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1301 East Olive Street  
 City Shorewood State WI Zip Code 53211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Regional Sales Mgr Specialty  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1928015**  
 Amount of Each Receipt this Period  
 20.00

**B. Jay Blind**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1301 East Olive Street  
 City Shorewood State WI Zip Code 53211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Regional Sales Mgr Specialty  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139514**  
 Amount of Each Receipt this Period  
 20.00

**C. Jay Blind**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1301 East Olive Street  
 City Shorewood State WI Zip Code 53211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Regional Sales Mgr Specialty  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139515**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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: PAGE 18 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Jeffrey Bloss**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21685 N. Crown Road  
 City State Zip Code  
 Barrington IL 60010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Scientific & Medical Affairs Sr VP Astellas Scientific & Med Aff  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 3845.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927966**  
 Amount of Each Receipt this Period  
 221.68

**B. Jeffrey Bloss**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21685 N. Crown Road  
 City State Zip Code  
 Barrington IL 60010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Scientific & Medical Affairs Sr VP Astellas Scientific & Med Aff  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4066.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139413**  
 Amount of Each Receipt this Period  
 221.68

**C. Jeffrey Bloss**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21685 N. Crown Road  
 City State Zip Code  
 Barrington IL 60010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Scientific & Medical Affairs Sr VP Astellas Scientific & Med Aff  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 4288.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2139412**  
 Amount of Each Receipt this Period  
 221.68

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 665.04  
**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: PAGE 19 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. David Boyd**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3317 Blueberry Climber  
 City Las Vegas State NV Zip Code 89031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Dir Corporatized Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927923**  
 Amount of Each Receipt this Period  
 20.00

**B. David Boyd**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3317 Blueberry Climber  
 City Las Vegas State NV Zip Code 89031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Dir Corporatized Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139323**  
 Amount of Each Receipt this Period  
 20.00

**C. David Boyd**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3317 Blueberry Climber  
 City Las Vegas State NV Zip Code 89031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Dir Corporatized Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2139322**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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: PAGE 20 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Mark Boyd**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4012 Clark Pkwy  
 City State Zip Code  
 Plano TX 75093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Regional Sales Mgr Specialty  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 540.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927968**  
 Amount of Each Receipt this Period  
 30.00

**B. Mark Boyd**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4012 Clark Pkwy  
 City State Zip Code  
 Plano TX 75093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Regional Sales Mgr Specialty  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 570.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139418**  
 Amount of Each Receipt this Period  
 30.00

**C. Mark Boyd**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4012 Clark Pkwy  
 City State Zip Code  
 Plano TX 75093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Regional Sales Mgr Specialty  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139419**  
 Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 90.00  
**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 21 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Brian Bradford</b>		Date of Receipt 08 / 29 / 2014 <b>Transaction ID : A2014-1927785</b>
Mailing Address 2290 Congressional Lane		Amount of Each Receipt this Period 25.00
City Riverwoods	State IL	Zip Code 60015
FEC ID number of contributing federal political committee. C		
Name of Employer ASTELLAS US LLC	Occupation Sr Director Financial Analysis BD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1189.46	

Full Name (Last, First, Middle Initial) <b>B. Brian Bradford</b>		Date of Receipt 09 / 12 / 2014 <b>Transaction ID : A2014-2139045</b>
Mailing Address 2290 Congressional Lane		Amount of Each Receipt this Period 25.00
City Riverwoods	State IL	Zip Code 60015
FEC ID number of contributing federal political committee. C		
Name of Employer ASTELLAS US LLC	Occupation Sr Director Financial Analysis BD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1214.46	

Full Name (Last, First, Middle Initial) <b>C. Brian Bradford</b>		Date of Receipt 09 / 26 / 2014 <b>Transaction ID : A2014-2139044</b>
Mailing Address 2290 Congressional Lane		Amount of Each Receipt this Period 25.00
City Riverwoods	State IL	Zip Code 60015
FEC ID number of contributing federal political committee. C		
Name of Employer ASTELLAS US LLC	Occupation Sr Director Financial Analysis BD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1239.46	

<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 22 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Kevin Brewer</b>		Date of Receipt MM / DD / YYYY 08 / 29 / 2014 <b>Transaction ID : A2014-1927848</b>
Mailing Address 2232 Parkway Dr.		Amount of Each Receipt this Period 20.00
City Winston-Salem	State NC	Zip Code 27103
FEC ID number of contributing federal political committee. C		
Name of Employer Astellas Pharma US Inc	Occupation Sr Exec Rep I Hospital	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>B. Kevin Brewer</b>		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 <b>Transaction ID : A2014-2139173</b>
Mailing Address 2232 Parkway Dr.		Amount of Each Receipt this Period 20.00
City Winston-Salem	State NC	Zip Code 27103
FEC ID number of contributing federal political committee. C		
Name of Employer Astellas Pharma US Inc	Occupation Sr Exec Rep I Hospital	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) <b>C. Kevin Brewer</b>		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 <b>Transaction ID : A2014-2139174</b>
Mailing Address 2232 Parkway Dr.		Amount of Each Receipt this Period 20.00
City Winston-Salem	State NC	Zip Code 27103
FEC ID number of contributing federal political committee. C		
Name of Employer Astellas Pharma US Inc	Occupation Sr Exec Rep I Hospital	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 106
	<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	

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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Pamela Buford**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4916 Sage Lane

City Long Grove	State IL	Zip Code 60047
--------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Multi-CulturalCommunicationsAdvocac
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2014

**Transaction ID : A2014-1927893**

Amount of Each Receipt this Period  

20.00
-------

**B. Pamela Buford**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4916 Sage Lane

City Long Grove	State IL	Zip Code 60047
--------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Multi-CulturalCommunicationsAdvocac
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : A2014-2139263**

Amount of Each Receipt this Period  

20.00
-------

**C. Pamela Buford**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4916 Sage Lane

City Long Grove	State IL	Zip Code 60047
--------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Multi-CulturalCommunicationsAdvocac
--	---

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
09	/	26	/	2014

**Transaction ID : A2014-2139264**

Amount of Each Receipt this Period  

20.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</b>
<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 106
	<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

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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Elizabeth Butler**  
Full Name (Last, First, Middle Initial)

Mailing Address 155 Bridgewater Boulevard  
Bridgewater II @ Old Agency

City Ridgeland State MS Zip Code 39157-8648

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

Name of Employer Astellas Pharma US Inc Occupation Sr Executive Representative I Hospi

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3456.00

Date of Receipt  
08 / 29 / 2014  
**Transaction ID : A2014-1927786**

Amount of Each Receipt this Period  
192.00

**B. Elizabeth Butler**  
Full Name (Last, First, Middle Initial)

Mailing Address 155 Bridgewater Boulevard  
Bridgewater II @ Old Agency

City Ridgeland State MS Zip Code 39157-8648

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

Name of Employer Astellas Pharma US Inc Occupation Sr Executive Representative I Hospi

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3648.00

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : A2014-2139046**

Amount of Each Receipt this Period  
192.00

**C. Elizabeth Butler**  
Full Name (Last, First, Middle Initial)

Mailing Address 155 Bridgewater Boulevard  
Bridgewater II @ Old Agency

City Ridgeland State MS Zip Code 39157-8648

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

Name of Employer Astellas Pharma US Inc Occupation Sr Executive Representative I Hospi

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3840.00

Date of Receipt  
09 / 26 / 2014  
**Transaction ID : A2014-2139047**

Amount of Each Receipt this Period  
192.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	576.00
<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 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. David Case**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1767 Andrea Place

City Santa Clara	State CA	Zip Code 95051
---------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sr Mgr Government Accounts
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2014

**Transaction ID : A2014-1927802**

Amount of Each Receipt this Period  

20.00
-------

**B. David Case**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1767 Andrea Place

City Santa Clara	State CA	Zip Code 95051
---------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sr Mgr Government Accounts
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : A2014-2139079**

Amount of Each Receipt this Period  

20.00
-------

**C. David Case**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1767 Andrea Place

City Santa Clara	State CA	Zip Code 95051
---------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sr Mgr Government Accounts
--	--

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
09	/	26	/	2014

**Transaction ID : A2014-2139078**

Amount of Each Receipt this Period  

20.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</b>
<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 106		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Bonnie Crane**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 Mangrove Pointe  
 City St. Pete Beach State FL Zip Code 33706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Dir Strategic Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927783**  
 Amount of Each Receipt this Period  
 20.00

**B. Bonnie Crane**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 Mangrove Pointe  
 City St. Pete Beach State FL Zip Code 33706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Dir Strategic Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139040**  
 Amount of Each Receipt this Period  
 20.00

**C. Bonnie Crane**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 Mangrove Pointe  
 City St. Pete Beach State FL Zip Code 33706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Dir Strategic Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2139041**  
 Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 27 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Salvatore Cuomo</b>			Date of Receipt 08 / 29 / 2014 <b>Transaction ID : A2014-1927784</b>
Mailing Address 1260 Andrus Ave			Amount of Each Receipt this Period 20.00
City Downers Grove	State IL	Zip Code 60516	
FEC ID number of contributing federal political committee. C			
Name of Employer Astellas Pharma US Inc	Occupation Sr Trade Acct Dir		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) <b>B. Salvatore Cuomo</b>			Date of Receipt 09 / 12 / 2014 <b>Transaction ID : A2014-2139042</b>
Mailing Address 1260 Andrus Ave			Amount of Each Receipt this Period 20.00
City Downers Grove	State IL	Zip Code 60516	
FEC ID number of contributing federal political committee. C			
Name of Employer Astellas Pharma US Inc	Occupation Sr Trade Acct Dir		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00		

Full Name (Last, First, Middle Initial) <b>C. Salvatore Cuomo</b>			Date of Receipt 09 / 26 / 2014 <b>Transaction ID : A2014-2139043</b>
Mailing Address 1260 Andrus Ave			Amount of Each Receipt this Period 20.00
City Downers Grove	State IL	Zip Code 60516	
FEC ID number of contributing federal political committee. C			
Name of Employer Astellas Pharma US Inc	Occupation Sr Trade Acct Dir		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 28 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Charles Davis</b>		Date of Receipt 08 / 29 / 2014 <b>Transaction ID : A2014-1928025</b>
Mailing Address 154 Reunion Blvd.		Amount of Each Receipt this Period 20.00
City Madison	State MS	Zip Code 39110
FEC ID number of contributing federal political committee. C	Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Mgr PCP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>B. Charles Davis</b>		Date of Receipt 09 / 12 / 2014 <b>Transaction ID : A2014-2139534</b>
Mailing Address 154 Reunion Blvd.		Amount of Each Receipt this Period 20.00
City Madison	State MS	Zip Code 39110
FEC ID number of contributing federal political committee. C	Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Mgr PCP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) <b>C. Charles Davis</b>		Date of Receipt 09 / 26 / 2014 <b>Transaction ID : A2014-2139535</b>
Mailing Address 154 Reunion Blvd.		Amount of Each Receipt this Period 20.00
City Madison	State MS	Zip Code 39110
FEC ID number of contributing federal political committee. C	Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Mgr PCP
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 29 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Deidra Ellis**  
Full Name (Last, First, Middle Initial)  
Mailing Address 15121 Holiday Drive

City Fontana	State CA	Zip Code 92336
-----------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Manager Specialty
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2014

**Transaction ID : A2014-1927990**

Amount of Each Receipt this Period  

20.00
-------

**B. Deidra Ellis**  
Full Name (Last, First, Middle Initial)  
Mailing Address 15121 Holiday Drive

City Fontana	State CA	Zip Code 92336
-----------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Manager Specialty
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : A2014-2139465**

Amount of Each Receipt this Period  

20.00
-------

**C. Deidra Ellis**  
Full Name (Last, First, Middle Initial)  
Mailing Address 15121 Holiday Drive

City Fontana	State CA	Zip Code 92336
-----------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Manager Specialty
--	--

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
09	/	26	/	2014

**Transaction ID : A2014-2139464**

Amount of Each Receipt this Period  

20.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</b>
<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 30 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Thomas Fussaro**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1328 W Belmont Ave  
 Unit #1W  
 City Chicago State IL Zip Code 60657  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Asc Health Systems Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 540.00

Date of Receipt  
 08 / 29 / 2014  
**Transaction ID : A2014-1927955**  
 Amount of Each Receipt this Period  
 30.00

**B. Thomas Fussaro**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1328 W Belmont Ave  
 Unit #1W  
 City Chicago State IL Zip Code 60657  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Asc Health Systems Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
 09 / 12 / 2014  
**Transaction ID : A2014-2139389**  
 Amount of Each Receipt this Period  
 30.00

**C. Thomas Fussaro**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1328 W Belmont Ave  
 Unit #1W  
 City Chicago State IL Zip Code 60657  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Asc Health Systems Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 09 / 26 / 2014  
**Transaction ID : A2014-2139388**  
 Amount of Each Receipt this Period  
 30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 90.00  
**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: PAGE 31 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Gary Gabrielsen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1373 Kenilwood Ct.  
 City Riverwoods State IL Zip Code 60015-1938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ASTELLAS US LLC Occupation VP Business Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 252.72

Date of Receipt  
 08 / 29 / 2014  
**Transaction ID : A2014-1927801**  
 Amount of Each Receipt this Period  
 14.04

**B. Gary Gabrielsen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1373 Kenilwood Ct.  
 City Riverwoods State IL Zip Code 60015-1938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ASTELLAS US LLC Occupation VP Business Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.76

Date of Receipt  
 09 / 12 / 2014  
**Transaction ID : A2014-2139077**  
 Amount of Each Receipt this Period  
 14.04

**C. Gary Gabrielsen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1373 Kenilwood Ct.  
 City Riverwoods State IL Zip Code 60015-1938  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ASTELLAS US LLC Occupation VP Business Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.80

Date of Receipt  
 09 / 26 / 2014  
**Transaction ID : A2014-2139076**  
 Amount of Each Receipt this Period  
 14.04

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 42.12  
**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 32 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Lynn Gerber**  
Full Name (Last, First, Middle Initial)

Mailing Address 872 South Milwaukee Ave. #258

City Libertyville	State IL	Zip Code 60048
----------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Area Vice President East
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : A2014-1927993**

Amount of Each Receipt this Period  
**20.00**

**B. Lynn Gerber**  
Full Name (Last, First, Middle Initial)

Mailing Address 872 South Milwaukee Ave. #258

City Libertyville	State IL	Zip Code 60048
----------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Area Vice President East
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 12 / 2014**

**Transaction ID : A2014-2139470**

Amount of Each Receipt this Period  
**20.00**

**C. Lynn Gerber**  
Full Name (Last, First, Middle Initial)

Mailing Address 872 South Milwaukee Ave. #258

City Libertyville	State IL	Zip Code 60048
----------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Area Vice President East
--	--

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  
**09 / 26 / 2014**

**Transaction ID : A2014-2139471**

Amount of Each Receipt this Period  
**20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</b>
<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 33 OF 106
<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Martin Golden**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2736 Valor Court

City Glenview	State IL	Zip Code 60026
------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation VP Government Affairs
--	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2014

**Transaction ID : A2014-1928016**

Amount of Each Receipt this Period  

20.00
-------

**B. Martin Golden**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2736 Valor Court

City Glenview	State IL	Zip Code 60026
------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation VP Government Affairs
--	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : A2014-2139516**

Amount of Each Receipt this Period  

20.00
-------

**C. Martin Golden**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2736 Valor Court

City Glenview	State IL	Zip Code 60026
------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation VP Government Affairs
--	-------------------------------------

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
09	/	26	/	2014

**Transaction ID : A2014-2139517**

Amount of Each Receipt this Period  

20.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</b>
<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 34 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Lori Grudi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17 Millstone Dr.  
 City Palmyra State PA Zip Code 17078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr PCP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927992**  
 Amount of Each Receipt this Period  
 20.00

**B. Lori Grudi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17 Millstone Dr.  
 City Palmyra State PA Zip Code 17078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr PCP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139469**  
 Amount of Each Receipt this Period  
 20.00

**C. Lori Grudi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17 Millstone Dr.  
 City Palmyra State PA Zip Code 17078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr PCP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2139468**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 35 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Tyler Hartmann**  
Full Name (Last, First, Middle Initial)

Mailing Address 7908 NE 88th Terr

City Kansas City	State MO	Zip Code 64157
---------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Mgr Oncology
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2014

**Transaction ID : A2014-1927916**

Amount of Each Receipt this Period  

20.00
-------

**B. Tyler Hartmann**  
Full Name (Last, First, Middle Initial)

Mailing Address 7908 NE 88th Terr

City Kansas City	State MO	Zip Code 64157
---------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Mgr Oncology
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : A2014-2139308**

Amount of Each Receipt this Period  

20.00
-------

**C. Tyler Hartmann**  
Full Name (Last, First, Middle Initial)

Mailing Address 7908 NE 88th Terr

City Kansas City	State MO	Zip Code 64157
---------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Mgr Oncology
--	---

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
09	/	26	/	2014

**Transaction ID : A2014-2139309**

Amount of Each Receipt this Period  

20.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</b>
<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 36 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Catherine Hogenkamp</b>			Date of Receipt MM / DD / YYYY 08 / 29 / 2014 <b>Transaction ID : A2014-1927820</b>
Mailing Address 413 Shadow Creek Ln			Amount of Each Receipt this Period 111.33
City Riverwoods	State IL	Zip Code 60015	
FEC ID number of contributing federal political committee. C			
Name of Employer ASTELLAS US LLC	Occupation Sr Director Corporate Planning		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1965.74		

Full Name (Last, First, Middle Initial) <b>B. Catherine Hogenkamp</b>			Date of Receipt MM / DD / YYYY 09 / 12 / 2014 <b>Transaction ID : A2014-2139117</b>
Mailing Address 413 Shadow Creek Ln			Amount of Each Receipt this Period 111.33
City Riverwoods	State IL	Zip Code 60015	
FEC ID number of contributing federal political committee. C			
Name of Employer ASTELLAS US LLC	Occupation Sr Director Corporate Planning		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2077.07		

Full Name (Last, First, Middle Initial) <b>C. Catherine Hogenkamp</b>			Date of Receipt MM / DD / YYYY 09 / 26 / 2014 <b>Transaction ID : A2014-2139116</b>
Mailing Address 413 Shadow Creek Ln			Amount of Each Receipt this Period 111.33
City Riverwoods	State IL	Zip Code 60015	
FEC ID number of contributing federal political committee. C			
Name of Employer ASTELLAS US LLC	Occupation Sr Director Corporate Planning		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2188.40		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	333.99
<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 37 OF 106  
(check only one)  
 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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Jill Hutton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 326 Gaugin Dr.  
 City Osprey State FL Zip Code 34229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Executive Rep I Oncology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927917**  
 Amount of Each Receipt this Period  
 20.00

**B. Jill Hutton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 326 Gaugin Dr.  
 City Osprey State FL Zip Code 34229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Executive Rep I Oncology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139310**  
 Amount of Each Receipt this Period  
 20.00

**C. Jill Hutton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 326 Gaugin Dr.  
 City Osprey State FL Zip Code 34229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Executive Rep I Oncology  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139311**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 38 OF 106
	<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

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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Matthew Jackson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1021 Henry Terrace  
City Lawrenceville State GA Zip Code 30046-7352  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Astellas Pharma US Inc Occupation Director Government Accounts  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
08 / 29 / 2014  
**Transaction ID : A2014-1927980**  
Amount of Each Receipt this Period  
15.00

**B. Matthew Jackson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1021 Henry Terrace  
City Lawrenceville State GA Zip Code 30046-7352  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Astellas Pharma US Inc Occupation Director Government Accounts  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 285.00

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : A2014-2139445**  
Amount of Each Receipt this Period  
15.00

**C. Matthew Jackson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1021 Henry Terrace  
City Lawrenceville State GA Zip Code 30046-7352  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Astellas Pharma US Inc Occupation Director Government Accounts  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
09 / 26 / 2014  
**Transaction ID : A2014-2139444**  
Amount of Each Receipt this Period  
15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 45.00  
**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 39 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Carl Johnston**  
Full Name (Last, First, Middle Initial)

Mailing Address 25 Branchville Rd

City Ridgefield State CT Zip Code 06877

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

Name of Employer Astellas Pharma US Inc Occupation VP Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : A2014-192875**

Amount of Each Receipt this Period  
**20.00**

**B. Carl Johnston**  
Full Name (Last, First, Middle Initial)

Mailing Address 25 Branchville Rd

City Ridgefield State CT Zip Code 06877

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

Name of Employer Astellas Pharma US Inc Occupation VP Marketing

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 12 / 2014**

**Transaction ID : A2014-2139228**

Amount of Each Receipt this Period  
**20.00**

**C. Carl Johnston**  
Full Name (Last, First, Middle Initial)

Mailing Address 25 Branchville Rd

City Ridgefield State CT Zip Code 06877

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

Name of Employer Astellas Pharma US Inc Occupation VP Marketing

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  
**09 / 26 / 2014**

**Transaction ID : A2014-2139227**

Amount of Each Receipt this Period  
**20.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **60.00**

**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: PAGE 40 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Mark Joyner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1310 Isleworth Drive  
 City State Zip Code  
 Louisville KY 40245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Executive Representative I Hospi  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927964**  
 Amount of Each Receipt this Period  
 20.00

**B. Mark Joyner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1310 Isleworth Drive  
 City State Zip Code  
 Louisville KY 40245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Executive Representative I Hospi  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139406**  
 Amount of Each Receipt this Period  
 20.00

**C. Mark Joyner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1310 Isleworth Drive  
 City State Zip Code  
 Louisville KY 40245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Executive Representative I Hospi  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139407**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 41 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Peggy Jurgensmeyer**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12541 Knox

City Overland Park	State KS	Zip Code 66213
-----------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Mgr Hospital
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
08	/	29	/	2014

**Transaction ID : A2014-1928013**

Amount of Each Receipt this Period  
15.00

**B. Peggy Jurgensmeyer**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12541 Knox

City Overland Park	State KS	Zip Code 66213
-----------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Mgr Hospital
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : A2014-2139510**

Amount of Each Receipt this Period  
15.00

**C. Peggy Jurgensmeyer**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12541 Knox

City Overland Park	State KS	Zip Code 66213
-----------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Mgr Hospital
--	---

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
09	/	26	/	2014

**Transaction ID : A2014-2139511**

Amount of Each Receipt this Period  
15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<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 42 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Gary Kaiser</b>		Date of Receipt 08 / 29 / 2014 <b>Transaction ID : A2014-1927846</b>
Mailing Address 617 N. Paulina St. Unit 3N City Chicago State IL Zip Code 60622		Amount of Each Receipt this Period 38.13
FEC ID number of contributing federal political committee. C	Name of Employer Astellas Pharma US Inc Occupation Director Marketing Dermatology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 673.44	

Full Name (Last, First, Middle Initial) <b>B. Gary Kaiser</b>		Date of Receipt 09 / 12 / 2014 <b>Transaction ID : A2014-2139169</b>
Mailing Address 617 N. Paulina St. Unit 3N City Chicago State IL Zip Code 60622		Amount of Each Receipt this Period 38.13
FEC ID number of contributing federal political committee. C	Name of Employer Astellas Pharma US Inc Occupation Director Marketing Dermatology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 711.57	

Full Name (Last, First, Middle Initial) <b>C. Gary Kaiser</b>		Date of Receipt 09 / 26 / 2014 <b>Transaction ID : A2014-2139170</b>
Mailing Address 617 N. Paulina St. Unit 3N City Chicago State IL Zip Code 60622		Amount of Each Receipt this Period 38.13
FEC ID number of contributing federal political committee. C	Name of Employer Astellas Pharma US Inc Occupation Director Marketing Dermatology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 749.70	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	114.39
<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 43 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Maria Karas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2447 W Haddon Ave #3  
 City Chicago State IL Zip Code 60622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation GMS Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1928020**  
 Amount of Each Receipt this Period  
 50.00

**B. Maria Karas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2447 W Haddon Ave #3  
 City Chicago State IL Zip Code 60622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation GMS Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139524**  
 Amount of Each Receipt this Period  
 50.00

**C. Maria Karas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2447 W Haddon Ave #3  
 City Chicago State IL Zip Code 60622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation GMS Dir  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139525**  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 150.00  
**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 44 OF 106
<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Jeffrey Kern**  
Full Name (Last, First, Middle Initial)

Mailing Address 1078 Vista Drive

City Gurnee State IL Zip Code 60031

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

Name of Employer Astellas Pharma US Inc Occupation VP GMS Therapeutic Head

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
**08 / 29 / 2014**  
**Transaction ID : A2014-1927809**

Amount of Each Receipt this Period  
**20.00**

**B. Jeffrey Kern**  
Full Name (Last, First, Middle Initial)

Mailing Address 1078 Vista Drive

City Gurnee State IL Zip Code 60031

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

Name of Employer Astellas Pharma US Inc Occupation VP GMS Therapeutic Head

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  
**09 / 12 / 2014**  
**Transaction ID : A2014-2139094**

Amount of Each Receipt this Period  
**20.00**

**C. Jeffrey Kern**  
Full Name (Last, First, Middle Initial)

Mailing Address 1078 Vista Drive

City Gurnee State IL Zip Code 60031

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

Name of Employer Astellas Pharma US Inc Occupation VP GMS Therapeutic Head

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
**09 / 26 / 2014**  
**Transaction ID : A2014-2139095**

Amount of Each Receipt this Period  
**20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **60.00**

**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 45 OF 106
	<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	

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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Thomas Lachowsky**  
Full Name (Last, First, Middle Initial)

Mailing Address 2010 Kittiwake Lane

City Cedar Park State TX Zip Code 78613

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

Name of Employer Astellas Pharma US Inc Occupation Regional Account Mgr SouthCentralRe

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : A2014-1928014**

Amount of Each Receipt this Period  
**30.00**

**B. Thomas Lachowsky**  
Full Name (Last, First, Middle Initial)

Mailing Address 2010 Kittiwake Lane

City Cedar Park State TX Zip Code 78613

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

Name of Employer Astellas Pharma US Inc Occupation Regional Account Mgr SouthCentralRe

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **570.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 12 / 2014**

**Transaction ID : A2014-2139513**

Amount of Each Receipt this Period  
**30.00**

**C. Thomas Lachowsky**  
Full Name (Last, First, Middle Initial)

Mailing Address 2010 Kittiwake Lane

City Cedar Park State TX Zip Code 78613

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

Name of Employer Astellas Pharma US Inc Occupation Regional Account Mgr SouthCentralRe

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  
**09 / 26 / 2014**

**Transaction ID : A2014-2139512**

Amount of Each Receipt this Period  
**30.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>90.00</b>
<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 46 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Jessica Lambert**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 268 Casa Robles St.  
 City Henderson State NV Zip Code 89012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Professional Representative II P  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 08 / 29 / 2014  
**Transaction ID : A2014-1927909**  
 Amount of Each Receipt this Period  
 20.00

**B. Jessica Lambert**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 268 Casa Robles St.  
 City Henderson State NV Zip Code 89012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Professional Representative II P  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 09 / 12 / 2014  
**Transaction ID : A2014-2139294**  
 Amount of Each Receipt this Period  
 20.00

**C. Jessica Lambert**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 268 Casa Robles St.  
 City Henderson State NV Zip Code 89012  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Professional Representative II P  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 09 / 26 / 2014  
**Transaction ID : A2014-2139295**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 47 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Maribeth Landwehr**  
Full Name (Last, First, Middle Initial)  
Mailing Address 307 W. Man-a-wa Trail

City Mount Prospect	State IL	Zip Code 60056
------------------------	-------------	-------------------

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

Name of Employer ASTELLAS US LLC	Occupation Sr Dir Strategic Comm and Collabora
-------------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1458.70

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2014

**Transaction ID : A2014-1927791**

Amount of Each Receipt this Period  

84.80
-------

**B. Maribeth Landwehr**  
Full Name (Last, First, Middle Initial)  
Mailing Address 307 W. Man-a-wa Trail

City Mount Prospect	State IL	Zip Code 60056
------------------------	-------------	-------------------

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

Name of Employer ASTELLAS US LLC	Occupation Sr Dir Strategic Comm and Collabora
-------------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1543.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : A2014-2139057**

Amount of Each Receipt this Period  

84.80
-------

**C. Maribeth Landwehr**  
Full Name (Last, First, Middle Initial)  
Mailing Address 307 W. Man-a-wa Trail

City Mount Prospect	State IL	Zip Code 60056
------------------------	-------------	-------------------

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

Name of Employer ASTELLAS US LLC	Occupation Sr Dir Strategic Comm and Collabora
-------------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1628.30

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

**Transaction ID : A2014-2139056**

Amount of Each Receipt this Period  

84.80
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	254.40
<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 48 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Christopher Leipski</b>		Date of Receipt MM / DD / YYYY 08 / 29 / 2014 <b>Transaction ID : A2014-1927870</b>
Mailing Address 7100 77th Ave Unit 162		Amount of Each Receipt this Period 14.78
City Kenosha	State WI	Zip Code 53142
FEC ID number of contributing federal political committee. C	Name of Employer Astellas Pharma US Inc	Occupation Sr Professional Representative I PC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.64	

Full Name (Last, First, Middle Initial) <b>B. Christopher Leipski</b>		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 <b>Transaction ID : A2014-2139217</b>
Mailing Address 7100 77th Ave Unit 162		Amount of Each Receipt this Period 14.78
City Kenosha	State WI	Zip Code 53142
FEC ID number of contributing federal political committee. C	Name of Employer Astellas Pharma US Inc	Occupation Sr Professional Representative I PC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.42	

Full Name (Last, First, Middle Initial) <b>C. Christopher Leipski</b>		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 <b>Transaction ID : A2014-2139218</b>
Mailing Address 7100 77th Ave Unit 162		Amount of Each Receipt this Period 14.78
City Kenosha	State WI	Zip Code 53142
FEC ID number of contributing federal political committee. C	Name of Employer Astellas Pharma US Inc	Occupation Sr Professional Representative I PC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.20	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	44.34
<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 49 OF 106
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Karen Lencoski**  
Full Name (Last, First, Middle Initial)

Mailing Address 421 Armour Road

City Avon Lake	State OH	Zip Code 44012
-------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Dir Government Strategy
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1122.28

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2014

**Transaction ID : A2014-1927940**

Amount of Each Receipt this Period  
63.61

**B. Karen Lencoski**  
Full Name (Last, First, Middle Initial)

Mailing Address 421 Armour Road

City Avon Lake	State OH	Zip Code 44012
-------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Dir Government Strategy
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1185.89

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : A2014-2139356**

Amount of Each Receipt this Period  
63.61

**C. Karen Lencoski**  
Full Name (Last, First, Middle Initial)

Mailing Address 421 Armour Road

City Avon Lake	State OH	Zip Code 44012
-------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Dir Government Strategy
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1249.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

**Transaction ID : A2014-2139357**

Amount of Each Receipt this Period  
63.61

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	190.83
<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 50 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Margaret Long</b>			Date of Receipt MM / DD / YYYY 08 / 29 / 2014 <b>Transaction ID : A2014-1928023</b>
Mailing Address 1333 H St NW			Amount of Each Receipt this Period 107.08
City Washington	State DC	Zip Code 20005	
FEC ID number of contributing federal political committee. C			
Name of Employer Astellas Pharma US Inc	Occupation VP Strategic Advocacy & Product Com		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1888.74		

Full Name (Last, First, Middle Initial) <b>B. Margaret Long</b>			Date of Receipt MM / DD / YYYY 09 / 12 / 2014 <b>Transaction ID : A2014-2139530</b>
Mailing Address 1333 H St NW			Amount of Each Receipt this Period 107.08
City Washington	State DC	Zip Code 20005	
FEC ID number of contributing federal political committee. C			
Name of Employer Astellas Pharma US Inc	Occupation VP Strategic Advocacy & Product Com		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1995.82		

Full Name (Last, First, Middle Initial) <b>c. Margaret Long</b>			Date of Receipt MM / DD / YYYY 09 / 26 / 2014 <b>Transaction ID : A2014-2139531</b>
Mailing Address 1333 H St NW			Amount of Each Receipt this Period 107.08
City Washington	State DC	Zip Code 20005	
FEC ID number of contributing federal political committee. C			
Name of Employer Astellas Pharma US Inc	Occupation VP Strategic Advocacy & Product Com		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2102.90		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	321.24
<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 51 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Frederick Lunsford Jr</b>			Date of Receipt 08 / 29 / 2014 <b>Transaction ID : A2014-1927899</b>
Mailing Address 142 Plantation Dr			Amount of Each Receipt this Period 23.20
City Leesburg	State GA	Zip Code 31763	
FEC ID number of contributing federal political committee. C			
Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Mgr PCP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.40		

Full Name (Last, First, Middle Initial) <b>B. Frederick Lunsford Jr</b>			Date of Receipt 09 / 12 / 2014 <b>Transaction ID : A2014-2139275</b>
Mailing Address 142 Plantation Dr			Amount of Each Receipt this Period 23.20
City Leesburg	State GA	Zip Code 31763	
FEC ID number of contributing federal political committee. C			
Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Mgr PCP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.60		

Full Name (Last, First, Middle Initial) <b>C. Frederick Lunsford Jr</b>			Date of Receipt 09 / 26 / 2014 <b>Transaction ID : A2014-2139276</b>
Mailing Address 142 Plantation Dr			Amount of Each Receipt this Period 23.20
City Leesburg	State GA	Zip Code 31763	
FEC ID number of contributing federal political committee. C			
Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Mgr PCP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 426.80		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	69.60
<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 52 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. John M Maddox**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 876 keeneland green dr  
 City union State KY Zip Code 41091  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Corp Acct Director Health Systems L  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 08 / 29 / 2014  
**Transaction ID : A2014-1927880**  
 Amount of Each Receipt this Period  
 20.00

**B. John M Maddox**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 876 keeneland green dr  
 City union State KY Zip Code 41091  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Corp Acct Director Health Systems L  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 09 / 12 / 2014  
**Transaction ID : A2014-2139237**  
 Amount of Each Receipt this Period  
 20.00

**C. John M Maddox**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 876 keeneland green dr  
 City union State KY Zip Code 41091  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Corp Acct Director Health Systems L  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 09 / 26 / 2014  
**Transaction ID : A2014-2139238**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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: PAGE 53 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Lori Magnoni**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 640 Middleton Lane  
 City State Zip Code  
 Des Plaines IL 60016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Associate Director SFA Systems Trai  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927897**  
 Amount of Each Receipt this Period  
 20.00

**B. Lori Magnoni**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 640 Middleton Lane  
 City State Zip Code  
 Des Plaines IL 60016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Associate Director SFA Systems Trai  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139271**  
 Amount of Each Receipt this Period  
 20.00

**C. Lori Magnoni**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 640 Middleton Lane  
 City State Zip Code  
 Des Plaines IL 60016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Associate Director SFA Systems Trai  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139272**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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: PAGE 54 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Bruce Mazer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10252 Gator Bay Court  
 City Naples State FL Zip Code 34120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation VP Health Systems Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 756.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927800**  
 Amount of Each Receipt this Period  
 42.00

**B. Bruce Mazer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10252 Gator Bay Court  
 City Naples State FL Zip Code 34120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation VP Health Systems Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 798.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139075**  
 Amount of Each Receipt this Period  
 42.00

**C. Bruce Mazer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10252 Gator Bay Court  
 City Naples State FL Zip Code 34120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation VP Health Systems Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2139074**  
 Amount of Each Receipt this Period  
 42.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 126.00  
**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 55 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. James McCauley**  
Full Name (Last, First, Middle Initial)

Mailing Address 1313 North Ritchie Court #1804  
Apt. E524

City Chicago State IL Zip Code 60610

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

Name of Employer: ASTELLAS US LLC Occupation: VP Compliance Regional Officer Amer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt: **08 / 29 / 2014**

**Transaction ID : A2014-1927831**

Amount of Each Receipt this Period: **20.00**

**B. James McCauley**  
Full Name (Last, First, Middle Initial)

Mailing Address 1313 North Ritchie Court #1804  
Apt. E524

City Chicago State IL Zip Code 60610

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

Name of Employer: ASTELLAS US LLC Occupation: VP Compliance Regional Officer Amer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt: **09 / 12 / 2014**

**Transaction ID : A2014-2139139**

Amount of Each Receipt this Period: **20.00**

**C. James McCauley**  
Full Name (Last, First, Middle Initial)

Mailing Address 1313 North Ritchie Court #1804  
Apt. E524

City Chicago State IL Zip Code 60610

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

Name of Employer: ASTELLAS US LLC Occupation: VP Compliance Regional Officer Amer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **09 / 26 / 2014**

**Transaction ID : A2014-2139140**

Amount of Each Receipt this Period: **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **60.00**

**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: PAGE 56 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Michael McDaniel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2021 Skelton Street  
 City Flower Mound State TX Zip Code 75022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Regional Sales Mgr Hospital  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 08 / 29 / 2014  
**Transaction ID : A2014-1927996**  
 Amount of Each Receipt this Period  
 20.00

**B. Michael McDaniel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2021 Skelton Street  
 City Flower Mound State TX Zip Code 75022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Regional Sales Mgr Hospital  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 09 / 12 / 2014  
**Transaction ID : A2014-2139476**  
 Amount of Each Receipt this Period  
 20.00

**C. Michael McDaniel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2021 Skelton Street  
 City Flower Mound State TX Zip Code 75022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Regional Sales Mgr Hospital  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 09 / 26 / 2014  
**Transaction ID : A2014-2139477**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 57 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Craig McHaffie</b>		Date of Receipt MM / DD / YYYY 08 / 29 / 2014 <b>Transaction ID : A2014-1927863</b>
Mailing Address 2758 E. Southern Hills Blvd. Hills Blvd.		Amount of Each Receipt this Period 20.00
City Springfield	State MO	
Zip Code 65804		Aggregate Year-to-Date ▼ 360.00
FEC ID number of contributing federal political committee. C		
Name of Employer Astellas Pharma US Inc	Occupation Sr Exec Rep II Hospital	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Craig McHaffie</b>		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 <b>Transaction ID : A2014-2139203</b>
Mailing Address 2758 E. Southern Hills Blvd. Hills Blvd.		Amount of Each Receipt this Period 20.00
City Springfield	State MO	
Zip Code 65804		Aggregate Year-to-Date ▼ 380.00
FEC ID number of contributing federal political committee. C		
Name of Employer Astellas Pharma US Inc	Occupation Sr Exec Rep II Hospital	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Craig McHaffie</b>		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 <b>Transaction ID : A2014-2139204</b>
Mailing Address 2758 E. Southern Hills Blvd. Hills Blvd.		Amount of Each Receipt this Period 20.00
City Springfield	State MO	
Zip Code 65804		Aggregate Year-to-Date ▼ 400.00
FEC ID number of contributing federal political committee. C		
Name of Employer Astellas Pharma US Inc	Occupation Sr Exec Rep II Hospital	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 58 OF 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Lamont Melvin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 67 Sweetspire Drive  
 City Elgin State SC Zip Code 29045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Access & Reimb Mgr Mid Atlantic  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **210.00**

Date of Receipt **09 / 26 / 2014**  
**Transaction ID : A2014-2139434**  
 Amount of Each Receipt this Period **30.00**

**B. Matthew Mercer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address HOME & OFFICE STORAGE Unit # E301 411 E. BERTKOUNS  
 City SHREVEPORT State LA Zip Code 71106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Exec Rep II Oncology  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **391.92**

Date of Receipt **08 / 29 / 2014**  
**Transaction ID : A2014-1927814**  
 Amount of Each Receipt this Period **23.21**

**C. Matthew Mercer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address HOME & OFFICE STORAGE Unit # E301 411 E. BERTKOUNS  
 City SHREVEPORT State LA Zip Code 71106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Exec Rep II Oncology  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **415.13**

Date of Receipt **09 / 12 / 2014**  
**Transaction ID : A2014-2139104**  
 Amount of Each Receipt this Period **23.21**

**SUBTOTAL** of Receipts This Page (optional)..... **76.42**  
**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 59 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Matthew Mercer**  
Full Name (Last, First, Middle Initial)

Mailing Address HOME & OFFICE STORAGE  
Unit # E301 411 E. BERTKOUNS

City SHREVEPORT State LA Zip Code 71106

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

Name of Employer Astellas Pharma US Inc Occupation Exec Rep II Oncology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
438.34

Date of Receipt  
09 / 26 / 2014  
**Transaction ID : A2014-2139105**

Amount of Each Receipt this Period  
23.21

**B. David Mershon**  
Full Name (Last, First, Middle Initial)

Mailing Address 4624 Manor Way

City Flower Mound State TX Zip Code 75028

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

Name of Employer Astellas Pharma US Inc Occupation Sales Director Hospital West Region

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
08 / 29 / 2014  
**Transaction ID : A2014-1927932**

Amount of Each Receipt this Period  
20.00

**C. David Mershon**  
Full Name (Last, First, Middle Initial)

Mailing Address 4624 Manor Way

City Flower Mound State TX Zip Code 75028

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

Name of Employer Astellas Pharma US Inc Occupation Sales Director Hospital West Region

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : A2014-2139340**

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 63.21

**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 60 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. David Mershon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4624 Manor Way  
 City Flower Mound State TX Zip Code 75028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sales Director Hospital West Region  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139341**  
 Amount of Each Receipt this Period  
 20.00

**B. Adam Miller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 47478 Parkgate Court  
 City Canton State MI Zip Code 48188  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Dir Healthcare Reform Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 756.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927999**  
 Amount of Each Receipt this Period  
 42.00

**C. Adam Miller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 47478 Parkgate Court  
 City Canton State MI Zip Code 48188  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Dir Healthcare Reform Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 798.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139482**  
 Amount of Each Receipt this Period  
 42.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	104.00
<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 61 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Adam Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 47478 Parkgate Court

City Canton State MI Zip Code 48188

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

Name of Employer Astellas Pharma US Inc Occupation Dir Healthcare Reform Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 26 / 2014**

**Transaction ID : A2014-2139483**

Amount of Each Receipt this Period  
**42.00**

**B. Paul Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 733 15th St NW #819

City Washington State DC Zip Code 20005

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

Name of Employer Astellas Pharma US Inc Occupation Sr Dir State Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1527.30**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : A2014-1927868**

Amount of Each Receipt this Period  
**86.15**

**C. Paul Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 733 15th St NW #819

City Washington State DC Zip Code 20005

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

Name of Employer Astellas Pharma US Inc Occupation Sr Dir State Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1613.45**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 12 / 2014**

**Transaction ID : A2014-2139214**

Amount of Each Receipt this Period  
**86.15**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **214.30**

**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 62 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Paul Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 733 15th St NW #819

City Washington State DC Zip Code 20005

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

Name of Employer Astellas Pharma US Inc Occupation Sr Dir State Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1699.60**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 26 / 2014**

**Transaction ID : A2014-2139213**

Amount of Each Receipt this Period  
**86.15**

**B. Samuel Millit**  
Full Name (Last, First, Middle Initial)

Mailing Address 4403 Metler Court

City Powell State OH Zip Code 43065

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

Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr PCP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1009.83**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : A2014-1927962**

Amount of Each Receipt this Period  
**57.26**

**C. Samuel Millit**  
Full Name (Last, First, Middle Initial)

Mailing Address 4403 Metler Court

City Powell State OH Zip Code 43065

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

Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr PCP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1067.09**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 12 / 2014**

**Transaction ID : A2014-2139403**

Amount of Each Receipt this Period  
**57.26**

**SUBTOTAL** of Receipts This Page (optional)..... **200.67**

**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 63 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Samuel Millit**  
Full Name (Last, First, Middle Initial)

Mailing Address 4403 Mettler Court

City Powell State OH Zip Code 43065

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

Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr PCP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1124.35**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 26 / 2014**

**Transaction ID : A2014-2139402**

Amount of Each Receipt this Period  
**57.26**

**B. Michael Miner**  
Full Name (Last, First, Middle Initial)

Mailing Address 1358 Devonshire Road

City Buffalo Grove State IL Zip Code 60089

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

Name of Employer Astellas Pharma US Inc Occupation Sr Dir Sales Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : A2014-1927872**

Amount of Each Receipt this Period  
**20.00**

**C. Michael Miner**  
Full Name (Last, First, Middle Initial)

Mailing Address 1358 Devonshire Road

City Buffalo Grove State IL Zip Code 60089

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

Name of Employer Astellas Pharma US Inc Occupation Sr Dir Sales Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 12 / 2014**

**Transaction ID : A2014-2139221**

Amount of Each Receipt this Period  
**20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **97.26**

**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 64 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Michael Miner**  
Full Name (Last, First, Middle Initial)

Mailing Address 1358 Devonshire Road

City Buffalo Grove State IL Zip Code 60089

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

Name of Employer Astellas Pharma US Inc Occupation Sr Dir Sales Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
**09 / 26 / 2014**

**Transaction ID : A2014-2139222**

Amount of Each Receipt this Period  
**200.00**

**B. Steve Mitchell**  
Full Name (Last, First, Middle Initial)

Mailing Address 105 Green Turtle Lane

City Carolina Beach State NC Zip Code 28428

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

Name of Employer Astellas Pharma US Inc Occupation Director Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **756.00**

Date of Receipt  
**08 / 29 / 2014**

**Transaction ID : A2014-1927834**

Amount of Each Receipt this Period  
**42.00**

**C. Steve Mitchell**  
Full Name (Last, First, Middle Initial)

Mailing Address 105 Green Turtle Lane

City Carolina Beach State NC Zip Code 28428

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

Name of Employer Astellas Pharma US Inc Occupation Director Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **798.00**

Date of Receipt  
**09 / 12 / 2014**

**Transaction ID : A2014-2139145**

Amount of Each Receipt this Period  
**42.00**

**SUBTOTAL** of Receipts This Page (optional)..... **104.00**

**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 65 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Steve Mitchell**  
Full Name (Last, First, Middle Initial)

Mailing Address 105 Green Turtle Lane

City Carolina Beach State NC Zip Code 28428

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

Name of Employer Astellas Pharma US Inc Occupation Director Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **840.00**

Date of Receipt  
09 / 26 / 2014  
**Transaction ID : A2014-2139146**

Amount of Each Receipt this Period  
**42.00**

**B. James Vincent Miteff**  
Full Name (Last, First, Middle Initial)

Mailing Address 7N606 Whirlaway Dr.

City St. Charles State IL Zip Code 60175

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

Name of Employer Astellas Pharma US Inc Occupation Sr Director Corp & GPO/IHN/LTC Acco

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
08 / 29 / 2014  
**Transaction ID : A2014-1927799**

Amount of Each Receipt this Period  
**20.00**

**C. James Vincent Miteff**  
Full Name (Last, First, Middle Initial)

Mailing Address 7N606 Whirlaway Dr.

City St. Charles State IL Zip Code 60175

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

Name of Employer Astellas Pharma US Inc Occupation Sr Director Corp & GPO/IHN/LTC Acco

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : A2014-2139072**

Amount of Each Receipt this Period  
**20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **82.00**

**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 66 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. James Vincent Miteff**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7N606 Whirlaway Dr.  
 City St. Charles State IL Zip Code 60175  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Director Corp & GPO/IHN/LTC Acco  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139073**  
 Amount of Each Receipt this Period  
 200.00

**B. Barbara Morrow**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5052 Palmera Drive  
 City Oceanside State CA Zip Code 92056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Director Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1728.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927844**  
 Amount of Each Receipt this Period  
 96.00

**C. Barbara Morrow**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5052 Palmera Drive  
 City Oceanside State CA Zip Code 92056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Director Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1824.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139165**  
 Amount of Each Receipt this Period  
 96.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	212.00
<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:	PAGE 67 OF 106
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Barbara Morrow</b>			Date of Receipt
Mailing Address 5052 Palmera Drive			<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : A2014-2139166</b>
Oceanside	CA	92056	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="96.00"/>
Name of Employer	Occupation		
Astellas Pharma US Inc	Director Government Affairs		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1920.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. William Namorato</b>			Date of Receipt
Mailing Address 25 Outlook Dr South			<input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : A2014-1927845</b>
Mechanicville	NY	12118	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Astellas Pharma US Inc	Regional Sales Mgr Hospital		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="360.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. William Namorato</b>			Date of Receipt
Mailing Address 25 Outlook Dr South			<input type="text" value="09"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : A2014-2139168</b>
Mechanicville	NY	12118	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Astellas Pharma US Inc	Regional Sales Mgr Hospital		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="380.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="136.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 68 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. William Namorato**  
Full Name (Last, First, Middle Initial)

Mailing Address 25 Outlook Dr South

City State Zip Code  
Mechanicville NY 12118

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

Name of Employer Occupation  
Astellas Pharma US Inc Regional Sales Mgr Hospital

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  
09 / 26 / 2014  
**Transaction ID : A2014-2139167**

Amount of Each Receipt this Period  
20.00

**B. Lisa Nicoll**  
Full Name (Last, First, Middle Initial)

Mailing Address 2914 W Bayshore Ct

City State Zip Code  
Tampa FL 33611

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

Name of Employer Occupation  
Astellas Pharma US Inc Sr Regional Sales Mgr PCP

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  
09 / 26 / 2014  
**Transaction ID : A2014-2139484**

Amount of Each Receipt this Period  
30.00

**C. Douglas Noland**  
Full Name (Last, First, Middle Initial)

Mailing Address 715 John Court

City State Zip Code  
Lake Zurich IL 60047

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

Name of Employer Occupation  
Astellas Pharma US Inc Sr Dir Marketing CIE & Immunology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1774.26

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 29 / 2014  
**Transaction ID : A2014-1928030**

Amount of Each Receipt this Period  
99.87

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 149.87

**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 69 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Douglas Noland**  
Full Name (Last, First, Middle Initial)  
Mailing Address 715 John Court

City Lake Zurich	State IL	Zip Code 60047
---------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sr Dir Marketing CIE & Immunology
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1874.13

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : A2014-2139544**

Amount of Each Receipt this Period  
99.87

**B. Douglas Noland**  
Full Name (Last, First, Middle Initial)  
Mailing Address 715 John Court

City Lake Zurich	State IL	Zip Code 60047
---------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sr Dir Marketing CIE & Immunology
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1974.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

**Transaction ID : A2014-2139545**

Amount of Each Receipt this Period  
99.87

**C. Ian Norman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 20818 N Buffalo Run

City Kildeer	State IL	Zip Code 60047
-----------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sales Director PCP - Specialty
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2014

**Transaction ID : A2014-1927901**

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	219.74
<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 70 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Ian Norman**  
Full Name (Last, First, Middle Initial)

Mailing Address 20818 N Buffalo Run

City State Zip Code  
Kildeer IL 60047

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

Name of Employer Occupation  
Astellas Pharma US Inc Sales Director PCP - Specialty

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 12 / 2014  
**Transaction ID : A2014-2139278**

Amount of Each Receipt this Period  
20.00

**B. Ian Norman**  
Full Name (Last, First, Middle Initial)

Mailing Address 20818 N Buffalo Run

City State Zip Code  
Kildeer IL 60047

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

Name of Employer Occupation  
Astellas Pharma US Inc Sales Director PCP - Specialty

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  
09 / 26 / 2014  
**Transaction ID : A2014-2139279**

Amount of Each Receipt this Period  
20.00

**C. Paul Nunnally**  
Full Name (Last, First, Middle Initial)

Mailing Address 3219 Darien Drive

City State Zip Code  
Raleigh NC 27607

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

Name of Employer Occupation  
Astellas Pharma US Inc Sr Regional Sales Mgr Hospital

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 29 / 2014  
**Transaction ID : A2014-1927781**

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00

**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 71 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Paul Nunnally</b>		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 <b>Transaction ID : A2014-2139036</b>
Mailing Address 3219 Darien Drive		Amount of Each Receipt this Period 20.00
City Raleigh	State NC	Zip Code 27607
FEC ID number of contributing federal political committee.	C	
Name of Employer Astellas Pharma US Inc	Occupation Sr Regional Sales Mgr Hospital	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

Full Name (Last, First, Middle Initial) <b>B. Paul Nunnally</b>		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 <b>Transaction ID : A2014-2139037</b>
Mailing Address 3219 Darien Drive		Amount of Each Receipt this Period 20.00
City Raleigh	State NC	Zip Code 27607
FEC ID number of contributing federal political committee.	C	
Name of Employer Astellas Pharma US Inc	Occupation Sr Regional Sales Mgr Hospital	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Thomas O'Dare</b>		Date of Receipt MM / DD / YYYY 08 / 29 / 2014 <b>Transaction ID : A2014-1927906</b>
Mailing Address 129 W Village Dr		Amount of Each Receipt this Period 20.00
City St Augustine	State FL	Zip Code 32095
FEC ID number of contributing federal political committee.	C	
Name of Employer Astellas Pharma US Inc	Occupation Sr Executive Representative I Hospi	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 72 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Thomas O'Dare**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 129 W Village Dr  
 City St Augustine State FL Zip Code 32095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Executive Representative I Hospi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139288**  
 Amount of Each Receipt this Period  
 20.00

**B. Thomas O'Dare**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 129 W Village Dr  
 City St Augustine State FL Zip Code 32095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Executive Representative I Hospi  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139289**  
 Amount of Each Receipt this Period  
 20.00

**C. Kevin O'Keefe**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16219 Rainbow Lake Rd.  
 City Houston State TX Zip Code 77095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sales Director Hospital  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139161**  
 Amount of Each Receipt this Period  
 40.71

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.71
<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 73 OF 106
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Kevin O'Keefe**  
Full Name (Last, First, Middle Initial)

Mailing Address 16219 Rainbow Lake Rd.

City Houston	State TX	Zip Code 77095
-----------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sales Director Hospital
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.95

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

**Transaction ID : A2014-2139162**

Amount of Each Receipt this Period  
40.71

**B. Mark O'Rourke**  
Full Name (Last, First, Middle Initial)

Mailing Address 55 Railroad Place Unit 401

City Saratoga Springs	State NY	Zip Code 12866
--------------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Dir Government Affairs
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
377.15

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2014

**Transaction ID : A2014-1927977**

Amount of Each Receipt this Period  
75.43

**c. Mark O'Rourke**  
Full Name (Last, First, Middle Initial)

Mailing Address 55 Railroad Place Unit 401

City Saratoga Springs	State NY	Zip Code 12866
--------------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Dir Government Affairs
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
452.58

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : A2014-2139438**

Amount of Each Receipt this Period  
75.43

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	191.57
<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 74 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Mark O'Rourke**  
Full Name (Last, First, Middle Initial)

Mailing Address 55 Railroad Place Unit 401

City State Zip Code  
Saratoga Springs NY 12866

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

Name of Employer Occupation  
Astellas Pharma US Inc Dir Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**528.01**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**09 / 26 / 2014**

**Transaction ID : A2014-2139439**

Amount of Each Receipt this Period  
**75.43**

**B. Howard Pearson**  
Full Name (Last, First, Middle Initial)

Mailing Address 742 Meadow Lane

City State Zip Code  
Libertyville IL 60048

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

Name of Employer Occupation  
Astellas Pharma US Inc Sr Dir Commercial Training

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**360.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : A2014-1928017**

Amount of Each Receipt this Period  
**20.00**

**C. Howard Pearson**  
Full Name (Last, First, Middle Initial)

Mailing Address 742 Meadow Lane

City State Zip Code  
Libertyville IL 60048

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

Name of Employer Occupation  
Astellas Pharma US Inc Sr Dir Commercial Training

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**380.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**09 / 12 / 2014**

**Transaction ID : A2014-2139518**

Amount of Each Receipt this Period  
**20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>115.43</b>
<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 75 OF 106
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Howard Pearson</b>			Date of Receipt MM / DD / YYYY 09 / 26 / 2014 <b>Transaction ID : A2014-2139519</b>
Mailing Address 742 Meadow Lane			Amount of Each Receipt this Period 97.28
City Libertyville	State IL	Zip Code 60048	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 400.00	
Name of Employer Astellas Pharma US Inc		Occupation Sr Dir Commercial Training	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Reisor Pickett</b>			Date of Receipt MM / DD / YYYY 08 / 29 / 2014 <b>Transaction ID : A2014-1927792</b>
Mailing Address 308 Kendall Parkway			Amount of Each Receipt this Period 38.64
City Boerne	State TX	Zip Code 78015	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 676.47	
Name of Employer Astellas Pharma US Inc		Occupation Sr Strategic Account Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Reisor Pickett</b>			Date of Receipt MM / DD / YYYY 09 / 12 / 2014 <b>Transaction ID : A2014-2139058</b>
Mailing Address 308 Kendall Parkway			Amount of Each Receipt this Period 38.64
City Boerne	State TX	Zip Code 78015	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 715.11	
Name of Employer Astellas Pharma US Inc		Occupation Sr Strategic Account Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	97.28
<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 76 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Reisor Pickett**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 308 Kendall Parkway  
 City Boerne State TX Zip Code 78015  
 Date of Receipt: 09 / 26 / 2014  
**Transaction ID : A2014-2139059**  
 Amount of Each Receipt this Period: 38.64  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Astellas Pharma US Inc Occupation: Sr Strategic Account Mgr  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 753.75

**B. Sara Pipia**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2865 Trail Crest Lane  
 City Lindenhurst State IL Zip Code 60046  
 Date of Receipt: 08 / 29 / 2014  
**Transaction ID : A2014-1927815**  
 Amount of Each Receipt this Period: 20.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Astellas Pharma US Inc Occupation: Sr Mgr Sales Training  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 360.00

**C. Sara Pipia**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2865 Trail Crest Lane  
 City Lindenhurst State IL Zip Code 60046  
 Date of Receipt: 09 / 12 / 2014  
**Transaction ID : A2014-2139106**  
 Amount of Each Receipt this Period: 20.00  
 FEC ID number of contributing federal political committee: C  
 Name of Employer: Astellas Pharma US Inc Occupation: Sr Mgr Sales Training  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 380.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 78.64  
**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: PAGE 77 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Sara Pipia**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2865 Trail Crest Lane  
 City Lindenhurst State IL Zip Code 60046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Mgr Sales Training  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2139107**  
 Amount of Each Receipt this Period  
 20.00

**B. Thomas Pipia**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2865 Trail Crest Lane  
 City Lindenhurst State IL Zip Code 60046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sales Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927994**  
 Amount of Each Receipt this Period  
 20.00

**C. Thomas Pipia**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2865 Trail Crest Lane  
 City Lindenhurst State IL Zip Code 60046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sales Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139473**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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:	PAGE 78 OF 106
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Thomas Pipia**  
Full Name (Last, First, Middle Initial)

Mailing Address 2865 Trail Crest Lane

City Lindenhurst State IL Zip Code 60046

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

Name of Employer Astellas Pharma US Inc Occupation Sales Director

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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139472**

Amount of Each Receipt this Period  
 20.00

**B. Chris Proctor**  
Full Name (Last, First, Middle Initial)

Mailing Address 311 Plantation View Lane

City Mount Pleasant State SC Zip Code 29464

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

Name of Employer Astellas Pharma US Inc Occupation Sales Director Hospital

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 664.29

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927826**

Amount of Each Receipt this Period  
 38.48

**C. Chris Proctor**  
Full Name (Last, First, Middle Initial)

Mailing Address 311 Plantation View Lane

City Mount Pleasant State SC Zip Code 29464

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

Name of Employer Astellas Pharma US Inc Occupation Sales Director Hospital

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 702.77

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139128**

Amount of Each Receipt this Period  
 38.48

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	96.96
<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 79 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Chris Proctor**  
Full Name (Last, First, Middle Initial)

Mailing Address 311 Plantation View Lane

City Mount Pleasant	State SC	Zip Code 29464
------------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sales Director Hospital
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **741.25**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 26 / 2014**  
**Transaction ID : A2014-2139129**

Amount of Each Receipt this Period  
**38.48**

**B. Gregory Radenbaugh**  
Full Name (Last, First, Middle Initial)

Mailing Address 8409 Garnet Way

City McKinney	State TX	Zip Code 75070
------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Area Vice President West
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 29 / 2014**  
**Transaction ID : A2014-1927817**

Amount of Each Receipt this Period  
**50.00**

**C. Gregory Radenbaugh**  
Full Name (Last, First, Middle Initial)

Mailing Address 8409 Garnet Way

City McKinney	State TX	Zip Code 75070
------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Area Vice President West
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **950.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**09 / 12 / 2014**  
**Transaction ID : A2014-2139110**

Amount of Each Receipt this Period  
**50.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>138.48</b>
<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 80 OF 106
<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Gregory Radenbaugh</b>		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 <b>Transaction ID : A2014-2139111</b>
Mailing Address 8409 Garnet Way		Amount of Each Receipt this Period 9000.00
City McKinney	State TX	Zip Code 75070
FEC ID number of contributing federal political committee. C		
Name of Employer Astellas Pharma US Inc	Occupation Area Vice President West	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Brent Rasmussen</b>		Date of Receipt MM / DD / YYYY 08 / 29 / 2014 <b>Transaction ID : A2014-1927918</b>
Mailing Address 1 Astellas Way		Amount of Each Receipt this Period 20.00
City Northbrook	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		
Name of Employer Astellas Pharma US Inc	Occupation Director Oncology Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>C. Brent Rasmussen</b>		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 <b>Transaction ID : A2014-2139312</b>
Mailing Address 1 Astellas Way		Amount of Each Receipt this Period 20.00
City Northbrook	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C		
Name of Employer Astellas Pharma US Inc	Occupation Director Oncology Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<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 81 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Brent Rasmussen**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 Astellas Way

City Northbrook State IL Zip Code 60062

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

Name of Employer Astellas Pharma US Inc Occupation Director Oncology Marketing

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  
**09 / 26 / 2014**

**Transaction ID : A2014-2139313**

Amount of Each Receipt this Period  
**200.00**

**B. Emily Rath**  
Full Name (Last, First, Middle Initial)

Mailing Address 1811 Vernon St. NW

City Washington State DC Zip Code 20009

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

Name of Employer Astellas Pharma US Inc Occupation Director Government Strategy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1120.72**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : A2014-1927946**

Amount of Each Receipt this Period  
**63.69**

**C. Emily Rath**  
Full Name (Last, First, Middle Initial)

Mailing Address 1811 Vernon St. NW

City Washington State DC Zip Code 20009

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

Name of Employer Astellas Pharma US Inc Occupation Director Government Strategy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1184.41**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 12 / 2014**

**Transaction ID : A2014-2139370**

Amount of Each Receipt this Period  
**63.69**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>147.38</b>
<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 82 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Emily Rath**  
Full Name (Last, First, Middle Initial)

Mailing Address 1811 Vernon St. NW

City Washington State DC Zip Code 20009

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

Name of Employer Astellas Pharma US Inc Occupation Director Government Strategy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1248.10**

Date of Receipt  
**09 / 26 / 2014**

**Transaction ID : A2014-2139371**

Amount of Each Receipt this Period  
**63.69**

**B. Mark Reisenauer**  
Full Name (Last, First, Middle Initial)

Mailing Address 712 Porter Circle

City Lindenhurst State IL Zip Code 60046

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

Name of Employer Astellas Pharma US Inc Occupation VP Marketing & Sales Oncology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt  
**08 / 29 / 2014**

**Transaction ID : A2014-1927920**

Amount of Each Receipt this Period  
**30.00**

**C. Mark Reisenauer**  
Full Name (Last, First, Middle Initial)

Mailing Address 712 Porter Circle

City Lindenhurst State IL Zip Code 60046

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

Name of Employer Astellas Pharma US Inc Occupation VP Marketing & Sales Oncology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **570.00**

Date of Receipt  
**09 / 12 / 2014**

**Transaction ID : A2014-2139316**

Amount of Each Receipt this Period  
**30.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **123.69**

**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 83 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Mark Reisenauer**  
Full Name (Last, First, Middle Initial)

Mailing Address 712 Porter Circle

City Lindenhurst State IL Zip Code 60046

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

Name of Employer Astellas Pharma US Inc Occupation VP Marketing & Sales Oncology

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  
**09 / 26 / 2014**

**Transaction ID : A2014-2139317**

Amount of Each Receipt this Period  
**30.00**

**B. Mary Lacey Reuther**  
Full Name (Last, First, Middle Initial)

Mailing Address 803 Enderby Drive

City Alexandria State VA Zip Code 22302

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

Name of Employer Astellas Pharma US Inc Occupation Sr Dir Federal Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1702.34**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : A2014-1927913**

Amount of Each Receipt this Period  
**96.03**

**C. Mary Lacey Reuther**  
Full Name (Last, First, Middle Initial)

Mailing Address 803 Enderby Drive

City Alexandria State VA Zip Code 22302

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

Name of Employer Astellas Pharma US Inc Occupation Sr Dir Federal Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1798.37**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 12 / 2014**

**Transaction ID : A2014-2139302**

Amount of Each Receipt this Period  
**96.03**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>222.06</b>
<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 84 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Mary Lacey Reuther**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 803 Enderby Drive  
 City Alexandria State VA Zip Code 22302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Dir Federal Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1894.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2139303**  
 Amount of Each Receipt this Period  
 96.03

**B. Mike Roberson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3210 NE 183rd Place  
 City Vancouver State WA Zip Code 98682  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Corporatized Act Specialist Retail  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927927**  
 Amount of Each Receipt this Period  
 20.00

**C. Mike Roberson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3210 NE 183rd Place  
 City Vancouver State WA Zip Code 98682  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Corporatized Act Specialist Retail  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139330**  
 Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	136.03
<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 85 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Mike Roberson**  
Full Name (Last, First, Middle Initial)

Mailing Address 3210 NE 183rd Place

City Vancouver State WA Zip Code 98682

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

Name of Employer Astellas Pharma US Inc Occupation Corporatized Act Specialist Retail

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
09 / 26 / 2014  
**Transaction ID : A2014-2139331**

Amount of Each Receipt this Period  
20.00

**B. James Robinson**  
Full Name (Last, First, Middle Initial)

Mailing Address 36 Belle Grove Court

City Basking Ridge State NJ Zip Code 07920

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

Name of Employer Astellas Pharma US Inc Occupation President APUS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4724.68

Date of Receipt  
08 / 29 / 2014  
**Transaction ID : A2014-1928012**

Amount of Each Receipt this Period  
268.21

**C. James Robinson**  
Full Name (Last, First, Middle Initial)

Mailing Address 36 Belle Grove Court

City Basking Ridge State NJ Zip Code 07920

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

Name of Employer Astellas Pharma US Inc Occupation President APUS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4992.89

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : A2014-2139508**

Amount of Each Receipt this Period  
268.21

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 556.42

**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 86 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. James Robinson</b>		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 <b>Transaction ID : A2014-2139509</b>
Mailing Address 36 Belle Grove Court		Amount of Each Receipt this Period 7.11
City Basking Ridge	State NJ	Zip Code 07920
FEC ID number of contributing federal political committee.	C	
Name of Employer Astellas Pharma US Inc	Occupation President APUS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Patrick Runde</b>		Date of Receipt MM / DD / YYYY 08 / 29 / 2014 <b>Transaction ID : A2014-1928032</b>
Mailing Address 1929 Halifax Street		Amount of Each Receipt this Period 30.00
City Libertyville	State IL	Zip Code 60048
FEC ID number of contributing federal political committee.	C	
Name of Employer Astellas Pharma US Inc	Occupation Dir Trade Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	

Full Name (Last, First, Middle Initial) <b>C. Patrick Runde</b>		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 <b>Transaction ID : A2014-2139549</b>
Mailing Address 1929 Halifax Street		Amount of Each Receipt this Period 30.00
City Libertyville	State IL	Zip Code 60048
FEC ID number of contributing federal political committee.	C	
Name of Employer Astellas Pharma US Inc	Occupation Dir Trade Accounts	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	67.11
<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 87 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Patrick Runde**  
Full Name (Last, First, Middle Initial)

Mailing Address 1929 Halifax Street

City State Zip Code  
Libertyville IL 60048

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

Name of Employer Occupation  
Astellas Pharma US Inc Dir Trade Accounts

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  
09 / 26 / 2014  
**Transaction ID : A2014-2139548**

Amount of Each Receipt this Period  
300.00

**B. Steve Sabus**  
Full Name (Last, First, Middle Initial)

Mailing Address 3155 Kingbird Lane

City State Zip Code  
Naperville IL 60564

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

Name of Employer Occupation  
Astellas Pharma US Inc VP Sales PCP & SPC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 29 / 2014  
**Transaction ID : A2014-1927839**

Amount of Each Receipt this Period  
20.00

**C. Steve Sabus**  
Full Name (Last, First, Middle Initial)

Mailing Address 3155 Kingbird Lane

City State Zip Code  
Naperville IL 60564

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

Name of Employer Occupation  
Astellas Pharma US Inc VP Sales PCP & SPC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
09 / 12 / 2014  
**Transaction ID : A2014-2139155**

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.00

**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: PAGE 88 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Steve Sabus**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3155 Kingbird Lane  
 City Naperville State IL Zip Code 60564  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation VP Sales PCP & SPC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2014  
**Transaction ID : A2014-2139156**  
 Amount of Each Receipt this Period  
 20.00

**B. Jose Salazar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 815 NW 119th Street  
 City Gainesville State FL Zip Code 32606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Executive Representative I Hospi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1928024**  
 Amount of Each Receipt this Period  
 20.00

**C. Jose Salazar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 815 NW 119th Street  
 City Gainesville State FL Zip Code 32606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Executive Representative I Hospi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139532**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 89 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Jose Salazar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 815 NW 119th Street  
 City Gainesville State FL Zip Code 32606  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Executive Representative I Hospi  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139533**  
 Amount of Each Receipt this Period  
 20.00

**B. Frank Santaniello**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 210 E Witchwood Lane  
 City Lake Bluff State IL Zip Code 60044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Marketing Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927854**  
 Amount of Each Receipt this Period  
 20.00

**C. Frank Santaniello**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 210 E Witchwood Lane  
 City Lake Bluff State IL Zip Code 60044  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Sr Marketing Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139185**  
 Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 90 OF 106
<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Frank Santaniello**  
Full Name (Last, First, Middle Initial)

Mailing Address 210 E Witchwood Lane

City Lake Bluff	State IL	Zip Code 60044
--------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sr Marketing Mgr
--	--------------------------------

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
09	/	26	/	2014

**Transaction ID : A2014-2139186**

Amount of Each Receipt this Period  

20.00
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**B. Mark Schwitzenberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 333 S. Belmont

City Arlington Heights	State IL	Zip Code 60005
---------------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sr Director Urology Marketing
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2014

**Transaction ID : A2014-1927810**

Amount of Each Receipt this Period  

20.00
-------

**C. Mark Schwitzenberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 333 S. Belmont

City Arlington Heights	State IL	Zip Code 60005
---------------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sr Director Urology Marketing
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : A2014-2139096**

Amount of Each Receipt this Period  

20.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>60.00</b>
<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 91 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Mark Schwitzenberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 333 S. Belmont

City Arlington Heights State IL Zip Code 60005

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

Name of Employer Astellas Pharma US Inc Occupation Sr Director Urology Marketing

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  
**09 / 26 / 2014**

**Transaction ID : A2014-2139097**

Amount of Each Receipt this Period  
**20.00**

**B. Stephen Skinner**  
Full Name (Last, First, Middle Initial)

Mailing Address 4208 Judson Ave

City Houston State TX Zip Code 77008

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

Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr Hospital

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**08 / 29 / 2014**

**Transaction ID : A2014-1927827**

Amount of Each Receipt this Period  
**20.00**

**C. Stephen Skinner**  
Full Name (Last, First, Middle Initial)

Mailing Address 4208 Judson Ave

City Houston State TX Zip Code 77008

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

Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr Hospital

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**09 / 12 / 2014**

**Transaction ID : A2014-2139130**

Amount of Each Receipt this Period  
**20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **60.00**

**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 92 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Stephen Skinner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4208 Judson Ave  
 City Houston State TX Zip Code 77008  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr Hospital  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 26 / 2014  
**Transaction ID : A2014-2139131**  
 Amount of Each Receipt this Period 20.00

**B. John Slattery**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 451 Bellis Rd  
 City Bloomsbury State NJ Zip Code 08804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr PCP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 29 / 2014  
**Transaction ID : A2014-1927991**  
 Amount of Each Receipt this Period 20.00

**c. John Slattery**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 451 Bellis Rd  
 City Bloomsbury State NJ Zip Code 08804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr PCP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 12 / 2014  
**Transaction ID : A2014-2139466**  
 Amount of Each Receipt this Period 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 93 OF 106
<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. John Slattery**  
Full Name (Last, First, Middle Initial)

Mailing Address 451 Bellis Rd

City Bloomsbury	State NJ	Zip Code 08804
--------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Regional Sales Mgr PCP
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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
09	/	26	/	2014

**Transaction ID : A2014-2139467**

Amount of Each Receipt this Period  
20.00

**B. Derik Snodgrass**  
Full Name (Last, First, Middle Initial)

Mailing Address 2709 Providence Spring Ln

City Charlotte	State NC	Zip Code 28270
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FEC ID number of contributing federal political committee. **C**

Name of Employer Astellas Pharma US Inc	Occupation Associate Director Institutional Ac
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2014

**Transaction ID : A2014-1927816**

Amount of Each Receipt this Period  
20.00

**C. Derik Snodgrass**  
Full Name (Last, First, Middle Initial)

Mailing Address 2709 Providence Spring Ln

City Charlotte	State NC	Zip Code 28270
-------------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Associate Director Institutional Ac
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : A2014-2139108**

Amount of Each Receipt this Period  
20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 94 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Derik Snodgrass**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2709 Providence Spring Ln  
City Charlotte State NC Zip Code 28270  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Astellas Pharma US Inc Occupation Associate Director Institutional Ac  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 26 / 2014  
**Transaction ID : A2014-2139109**  
Amount of Each Receipt this Period 200.00

**B. Kenton Stewart**  
Full Name (Last, First, Middle Initial)  
Mailing Address 439 Moraine Rd  
City Highland Park State IL Zip Code 60035  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Astellas Pharma US Inc Occupation VP Health Systems  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1385.35

Date of Receipt 08 / 29 / 2014  
**Transaction ID : A2014-1928022**  
Amount of Each Receipt this Period 199.07

**C. Kenton Stewart**  
Full Name (Last, First, Middle Initial)  
Mailing Address 439 Moraine Rd  
City Highland Park State IL Zip Code 60035  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Astellas Pharma US Inc Occupation VP Health Systems  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1584.42

Date of Receipt 09 / 12 / 2014  
**Transaction ID : A2014-2139528**  
Amount of Each Receipt this Period 199.07

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 418.14  
**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 95 OF 106
<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Kenton Stewart</b>		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 <b>Transaction ID : A2014-2139529</b>
Mailing Address 439 Moraine Rd		Amount of Each Receipt this Period 199.07
City Highland Park	State IL	Zip Code 60035
FEC ID number of contributing federal political committee. C		
Name of Employer Astellas Pharma US Inc	Occupation VP Health Systems	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1783.49	

Full Name (Last, First, Middle Initial) <b>B. Amy Stollerman</b>		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 <b>Transaction ID : A2014-2139447</b>
Mailing Address 420 E 62nd Street Apt. 11D		Amount of Each Receipt this Period 20.00
City New York	State NY	Zip Code 10065
FEC ID number of contributing federal political committee. C		
Name of Employer Astellas Pharma US Inc	Occupation Executive Representative II Special	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) <b>C. Collette Taylor</b>		Date of Receipt MM / DD / YYYY 08 / 29 / 2014 <b>Transaction ID : A2014-1927830</b>
Mailing Address 807 Davis Street Unit 2303		Amount of Each Receipt this Period 50.00
City Evanston	State IL	Zip Code 60201
FEC ID number of contributing federal political committee. C		
Name of Employer ASTELLAS US LLC	Occupation Sr VP HR and Facilities Management	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	269.07
<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 97 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Corinne Thornton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2125 Westwood Rd  
City smyrna State GA Zip Code 30080  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr PCP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 570.00

Date of Receipt  
09 / 12 / 2014  
**Transaction ID : A2014-2139141**  
Amount of Each Receipt this Period  
30.00

**B. Corinne Thornton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2125 Westwood Rd  
City smyrna State GA Zip Code 30080  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr PCP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
09 / 26 / 2014  
**Transaction ID : A2014-2139142**  
Amount of Each Receipt this Period  
30.00

**C. Donetta Tramble**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6212 Hollytree Drive #626  
City Tyler State TX Zip Code 75703  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Astellas Pharma US Inc Occupation Professional Representative I PCP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 208.85

Date of Receipt  
09 / 26 / 2014  
**Transaction ID : A2014-2139158**  
Amount of Each Receipt this Period  
10.60

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.60  
**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: PAGE 98 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. James Turner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1315 Thousand Oaks loop  
 City san marcos State TX Zip Code 78666  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Director Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927788**  
 Amount of Each Receipt this Period  
 20.00

**B. James Turner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1315 Thousand Oaks loop  
 City san marcos State TX Zip Code 78666  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Director Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139050**  
 Amount of Each Receipt this Period  
 20.00

**C. James Turner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1315 Thousand Oaks loop  
 City san marcos State TX Zip Code 78666  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Director Government Affairs  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139051**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 99 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Susan Unruh</b>			Date of Receipt 08 / 29 / 2014 <b>Transaction ID : A2014-1928008</b>
Mailing Address 3836 E Ahwatukee Dr			Amount of Each Receipt this Period 20.00
City Phoenix	State AZ	Zip Code 85044	
FEC ID number of contributing federal political committee. C			
Name of Employer Astellas Pharma US Inc	Occupation Dir Market Access Account Managemen		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00		

Full Name (Last, First, Middle Initial) <b>B. Susan Unruh</b>			Date of Receipt 09 / 12 / 2014 <b>Transaction ID : A2014-2139500</b>
Mailing Address 3836 E Ahwatukee Dr			Amount of Each Receipt this Period 20.00
City Phoenix	State AZ	Zip Code 85044	
FEC ID number of contributing federal political committee. C			
Name of Employer Astellas Pharma US Inc	Occupation Dir Market Access Account Managemen		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00		

Full Name (Last, First, Middle Initial) <b>C. Susan Unruh</b>			Date of Receipt 09 / 26 / 2014 <b>Transaction ID : A2014-2139501</b>
Mailing Address 3836 E Ahwatukee Dr			Amount of Each Receipt this Period 20.00
City Phoenix	State AZ	Zip Code 85044	
FEC ID number of contributing federal political committee. C			
Name of Employer Astellas Pharma US Inc	Occupation Dir Market Access Account Managemen		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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 100 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Rosemary Varallo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 356 Bortons mill rd  
 1c  
 City State Zip Code  
 Cherry hill NJ 08034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Professional Representative I PC  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2014  
**Transaction ID : A2014-1927833**  
 Amount of Each Receipt this Period  
 20.00

**B. Rosemary Varallo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 356 Bortons mill rd  
 1c  
 City State Zip Code  
 Cherry hill NJ 08034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Professional Representative I PC  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2014  
**Transaction ID : A2014-2139143**  
 Amount of Each Receipt this Period  
 20.00

**C. Rosemary Varallo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 356 Bortons mill rd  
 1c  
 City State Zip Code  
 Cherry hill NJ 08034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Astellas Pharma US Inc Sr Professional Representative I PC  
 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  
 09 / 26 / 2014  
**Transaction ID : A2014-2139144**  
 Amount of Each Receipt this Period  
 20.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<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: PAGE 101 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Louis Vogel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5025 E. Glenngrae Ln  
 City Spokane State WA Zip Code 99223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Strategic Account Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 08 / 29 / 2014  
**Transaction ID : A2014-1927805**  
 Amount of Each Receipt this Period  
 20.00

**B. Louis Vogel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5025 E. Glenngrae Ln  
 City Spokane State WA Zip Code 99223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Strategic Account Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 09 / 12 / 2014  
**Transaction ID : A2014-2139084**  
 Amount of Each Receipt this Period  
 20.00

**C. Louis Vogel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5025 E. Glenngrae Ln  
 City Spokane State WA Zip Code 99223  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Strategic Account Mgr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 09 / 26 / 2014  
**Transaction ID : A2014-2139085**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 102 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

Full Name (Last, First, Middle Initial) <b>A. Mark Wade</b>		Date of Receipt MM / DD / YYYY 08 / 29 / 2014 <b>Transaction ID : A2014-1928002</b>
Mailing Address 13 Aubrey Court		Amount of Each Receipt this Period 20.98
City San Antonio	State TX	Zip Code 78216
FEC ID number of contributing federal political committee. C	Name of Employer Astellas Pharma US Inc	Occupation Sr Executive Representative I Hospi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 368.49	

Full Name (Last, First, Middle Initial) <b>B. Mark Wade</b>		Date of Receipt MM / DD / YYYY 09 / 12 / 2014 <b>Transaction ID : A2014-2139488</b>
Mailing Address 13 Aubrey Court		Amount of Each Receipt this Period 20.98
City San Antonio	State TX	Zip Code 78216
FEC ID number of contributing federal political committee. C	Name of Employer Astellas Pharma US Inc	Occupation Sr Executive Representative I Hospi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.47	

Full Name (Last, First, Middle Initial) <b>C. Mark Wade</b>		Date of Receipt MM / DD / YYYY 09 / 26 / 2014 <b>Transaction ID : A2014-2139489</b>
Mailing Address 13 Aubrey Court		Amount of Each Receipt this Period 20.98
City San Antonio	State TX	Zip Code 78216
FEC ID number of contributing federal political committee. C	Name of Employer Astellas Pharma US Inc	Occupation Sr Executive Representative I Hospi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.45	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	62.94
<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 103 OF 106
	<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)  
**Astellas US LLC PAC (Astellas PAC)**

**A. David Welsh**  
Full Name (Last, First, Middle Initial)

Mailing Address 4323 Belcarra Court

City Dublin	State CA	Zip Code 94568
----------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sr Regional Sales Mgr Hospital
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **571.11**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2014

**Transaction ID : A2014-1927892**

Amount of Each Receipt this Period  

32.52
-------

**B. David Welsh**  
Full Name (Last, First, Middle Initial)

Mailing Address 4323 Belcarra Court

City Dublin	State CA	Zip Code 94568
----------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sr Regional Sales Mgr Hospital
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **603.63**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : A2014-2139261**

Amount of Each Receipt this Period  

32.52
-------

**C. David Welsh**  
Full Name (Last, First, Middle Initial)

Mailing Address 4323 Belcarra Court

City Dublin	State CA	Zip Code 94568
----------------	-------------	-------------------

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

Name of Employer Astellas Pharma US Inc	Occupation Sr Regional Sales Mgr Hospital
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **636.15**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2014

**Transaction ID : A2014-2139262**

Amount of Each Receipt this Period  

32.52
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>97.56</b>
<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 104 OF 106  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Astellas US LLC PAC (Astellas PAC)**

**A. Chad Zscherny**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4351 NW 169th Court  
 City Clive State IA Zip Code 50325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr PCP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 08 / 29 / 2014  
**Transaction ID : A2014-1928003**  
 Amount of Each Receipt this Period  
 20.00

**B. Chad Zscherny**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4351 NW 169th Court  
 City Clive State IA Zip Code 50325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr PCP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 09 / 12 / 2014  
**Transaction ID : A2014-2139491**  
 Amount of Each Receipt this Period  
 20.00

**C. Chad Zscherny**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4351 NW 169th Court  
 City Clive State IA Zip Code 50325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Astellas Pharma US Inc Occupation Regional Sales Mgr PCP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 09 / 26 / 2014  
**Transaction ID : A2014-2139490**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**TOTAL** This Period (last page this line number only)..... ▶ 11111.87

