

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Regeneron Pharmaceuticals, Inc. PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		84484.34
(b) Cash on Hand at Beginning of Reporting Period.....	111107.41	
(c) Total Receipts (from Line 19)	2965.02	69070.43
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	114072.43	153554.77
7. Total Disbursements (from Line 31).....	50000.00	89482.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	64072.43	64072.43
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Regeneron Pharmaceuticals, Inc. PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2926.56	63537.96
(ii) Unitemized	38.46	2259.76
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2965.02	65797.72
(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)	2965.02	65797.72
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	3272.71
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)).....▶	2965.02	69070.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2965.02	69070.43

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	2982.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	2982.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	50000.00	86500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	50000.00	89482.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	50000.00	89482.34

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	2965.02	65797.72
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2965.02	65797.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	2982.34
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	3272.71
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	- 290.37

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Anderson, Keith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. Staff Scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6919
 Amount of Each Receipt this Period 25.00
 Memo Item
 \$25 Bi-weekly payroll deduction

B. Bermingham, Maya, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Gov. Affairs & Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4032.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6941
 Amount of Each Receipt this Period 192.00
 Memo Item
 \$192 Bi-weekly payroll deduction

C. Bernstein, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Exec. Dir. Research IT, Info Systems
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6926
 Amount of Each Receipt this Period 10.00
 Memo Item
 \$10 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	227.00
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 7 OF 21
	<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)
Regeneron Pharmaceuticals, Inc. PAC

A. Braunstein, Ned, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Sr. VP - Regulatory Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4032.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6929
 Amount of Each Receipt this Period 192.00
 Memo Item
 \$192 Bi-weekly payroll deduction

B. Carver, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) SVP- Clin. Scale Mfg. & Proc. Sciences
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2019.15

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6920
 Amount of Each Receipt this Period 96.15
 Memo Item
 \$96.15 Bi-weekly payroll deduction

C. Chen, Gang, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Protein Expression Sciences
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6937
 Amount of Each Receipt this Period 50.00
 Memo Item
 \$50 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	338.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Daly, Christopher, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) Sr. Director - Oncology & Angiogenesis
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2019.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2020

Transaction ID : SA11AI.6918

Amount of Each Receipt this Period
96.15

Memo Item
\$96.15 Bi-weekly payroll deduction

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

Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) Assoc. Director Therapeutic Antibodies
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2020

Transaction ID : SA11AI.6927

Amount of Each Receipt this Period
50.00

Memo Item
\$50 Bi-weekly payroll deduction

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

Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) Vice President, Deputy Controller
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2019.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2020

Transaction ID : SA11AI.6925

Amount of Each Receipt this Period
96.15

Memo Item
\$96.15 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	242.30
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 9 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Geba, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) SVP - Development Strategy & Analysis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 807.66

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6930
 Amount of Each Receipt this Period 38.46
 Memo Item
 \$38.46 Bi-weekly payroll deduction

B. Gilooly, Patrice, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) SVP - QA & Operations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2019.15

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6931
 Amount of Each Receipt this Period 96.15
 Memo Item
 \$96.15 Bi-weekly payroll deduction

C. Herman, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Senior Vice President - Early Clinical
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1540.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6951
 Amount of Each Receipt this Period 77.00
 Memo Item
 \$77 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....▶	211.61
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 10 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Kaplan, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Senior Director, Engineering
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6950
 Amount of Each Receipt this Period 15.00
 Memo Item
 \$15 Bi-weekly payroll deduction

B. Korja, Nisha, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Director, Public Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6943
 Amount of Each Receipt this Period 20.00
 Memo Item
 \$20 Bi-weekly payroll deduction

C. LaFond, Michelle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Senior Director-Scale Up & Developer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6945
 Amount of Each Receipt this Period 25.00
 Memo Item
 \$25 Bi-weekly payroll deduction

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 11 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. LaRosa, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Exec. VP - General Counsel & Secretar
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4038.30

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6922
 Amount of Each Receipt this Period 192.30
 Memo Item
 \$192.30 Bi-weekly payroll deduction

B. Lebel, Delman, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Director, State Affairs & State Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6944
 Amount of Each Receipt this Period 50.00
 Memo Item
 \$50 Bi-weekly payroll deduction

C. Levine, Beth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) SVP - Assoc. GC, Chief Compliance Off
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6924
 Amount of Each Receipt this Period 50.00
 Memo Item
 \$50 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	292.30
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 12 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Mellis, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) VP - Clinical Sciences Trans. Medicine
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4038.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2020

Transaction ID : SA11AI.6917

Amount of Each Receipt this Period
 192.30

Memo Item
 \$192.30 Bi-weekly payroll deduction

B. Murphy, Andrew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) Executive VP, Research -Regeneron L
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4038.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2020

Transaction ID : SA11AI.6933

Amount of Each Receipt this Period
 192.30

Memo Item
 \$192.30 Bi-weekly payroll deduction

C. Olson, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) VP - Research & Development
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4038.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2020

Transaction ID : SA11AI.6921

Amount of Each Receipt this Period
 192.30

Memo Item
 \$192.30 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	576.90
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: (check only one)	PAGE 13 OF 21
	<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)
Regeneron Pharmaceuticals, Inc. PAC

A. Paull, Sally, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) Sr. Vice President - Human Resources
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4032.00

Date of Receipt
 10 / 09 / 2020
Transaction ID : SA11AI.6938

Amount of Each Receipt this Period
192.00

Memo Item
\$192 Bi-weekly payroll deduction

B. Rideman, Ronald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) Director - Medical Affairs
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 10 / 09 / 2020
Transaction ID : SA11AI.6928

Amount of Each Receipt this Period
10.00

Memo Item
\$10 Bi-weekly payroll deduction

C. Ruddy, Marcella, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road

City Tarrytown	State NY	Zip Code 10591
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Regeneron Pharmaceuticals Inc.	Occupation (for Individual) VP - Early Clinical Devt & Experimenta
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4032.00

Date of Receipt
 10 / 09 / 2020
Transaction ID : SA11AI.6935

Amount of Each Receipt this Period
192.00

Memo Item
\$192 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....	394.00
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 14 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Soo, Yuhwen, S, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP Biostatistics and Data Mgmt, Clinic
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4032.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6942
 Amount of Each Receipt this Period 192.00
 Memo Item
 \$192 Bi-weekly payroll deduction

B. Thurston, Olin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP - Oncology & Angiogenesis
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6939
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$100 Bi-weekly payroll deduction

C. Vitti, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) VP Clinical Sciences - Ophthalmology
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2019.15

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6932
 Amount of Each Receipt this Period 96.15
 Memo Item
 \$96.15 Bi-weekly payroll deduction

SUBTOTAL of Receipts This Page (optional).....▶	388.15
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 15 OF 21
	<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)
Regeneron Pharmaceuticals, Inc. PAC

A. Volpe, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Vice President - Tax
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2019.15

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6923
 Amount of Each Receipt this Period 96.15
 Memo Item
 \$96.15 Bi-weekly payroll deduction

B. Zambrowicz, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) SVP - Functional Genomics and Chief
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 10 / 09 / 2020
Transaction ID : SA11AI.6934
 Amount of Each Receipt this Period 100.00
 Memo Item
 \$100 Bi-weekly payroll deduction

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	196.15
TOTAL This Period (last page this line number only).....	2926.56

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. BEN SASSE FOR U.S. SENATE, INC.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			20	20		

Mailing Address 700 R ST
UNIT 83978

City LINCORN State NE Zip Code 68501

FEC Identification Number

C C00547976

Transaction ID : SB23.6957

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
SASSE, BENJAMIN E, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: NE District: 00

Memo Item

Full Name (Last, First, Middle Initial)
B. BRADY FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			20	20		

Mailing Address PO BOX 8277

City THE WOODLANDS State TX Zip Code 77387

FEC Identification Number

C C00311043

Transaction ID : SB23.6960

Amount of Each Disbursement this Period

3500.00

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
BRADY, KEVIN, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: TX District: 08

Memo Item

Full Name (Last, First, Middle Initial)
C. BUCSHON FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			20	20		

Mailing Address PO BOX 250

City NEWBURGH State IN Zip Code 47629

FEC Identification Number

C C00468256

Transaction ID : SB23.6954

Amount of Each Disbursement this Period

3500.00

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
BUCSHON, LARRY D., , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: IN District: 08

Memo Item

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

8000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. CHRIS COONS FOR DELAWARE		Date of Disbursement MM / DD / YYYY 10 / 08 / 2020
Mailing Address PO BOX 9900		FEC Identification Number C 000475392 Transaction ID : SB23.6962
City NEWARK	State DE	Zip Code 19714
Purpose of Disbursement Political Contribution		011 Category/ Type
Candidate Name COONS, CHRISTOPHER A., , ,		Amount of Each Disbursement this Period 2500.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: DE	District: 00	

Full Name (Last, First, Middle Initial) B. CHRIS COONS FOR DELAWARE		Date of Disbursement MM / DD / YYYY 10 / 08 / 2020
Mailing Address PO BOX 9900		FEC Identification Number C 000475392 Transaction ID : SB23.6986
City NEWARK	State DE	Zip Code 19714
Purpose of Disbursement Political Contribution		011 Category/ Type
Candidate Name COONS, CHRISTOPHER A., , ,		Amount of Each Disbursement this Period 2500.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: DE	District: 00	

Full Name (Last, First, Middle Initial) C. CLARKE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 08 / 2020
Mailing Address PO BOX 250200		FEC Identification Number C 000415331 Transaction ID : SB23.6972
City BROOKLYN	State NY	Zip Code 11225
Purpose of Disbursement Political Contribution		011 Category/ Type
Candidate Name CLARKE, YVETTE, , ,		Amount of Each Disbursement this Period 1500.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY	District: 09	

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

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

6500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Regeneron Pharmaceuticals, Inc. PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF NEAL DUNN

Mailing Address PO BOX 16088

City
PANAMA CITY

State
FL

Zip Code
32406

Purpose of Disbursement
Political Contribution

011

Category/
Type

Candidate Name

DUNN, NEAL PATRICK MD, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: FL District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			20	20		

FEC Identification Number

C C00582304

Transaction ID : SB23.6963

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF ROY BLUNT

Mailing Address PO BOX 10178

City
COLUMBIA

State
MO

Zip Code
65205

Purpose of Disbursement
Political Contribution

011

Category/
Type

Candidate Name

BLUNT, ROY, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: MO District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			20	20		

FEC Identification Number

C C00304758

Transaction ID : SB23.6980

Amount of Each Disbursement this Period

3500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. IMPACT

Mailing Address 192 LEXINGTON AVE.
SUITE 1001

City
NEW YORK

State
NY

Zip Code
10016

Purpose of Disbursement
Political Contribution

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			08			20	20		

FEC Identification Number

C C00348607

Transaction ID : SB23.6966

Amount of Each Disbursement this Period

5000.00

Memo Item

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

11000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. KIND FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address 205 5TH AVENUE S
ROOM 411

City LA CROSSE State WI Zip Code 54601

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
KIND, RONALD JAMES, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: WI District: 03

Date of Disbursement
MM / DD / YYYY
10 / 08 / 2020

FEC Identification Number
C C00312017
Transaction ID : SB23.6955
Amount of Each Disbursement this Period
2500.00

Memo Item

B. LONE STAR LEADERSHIP PAC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
10 / 08 / 2020

FEC Identification Number
C C00415208
Transaction ID : SB23.6969
Amount of Each Disbursement this Period
2500.00

Memo Item

C. NADLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 200 WEST 79TH STREET, #8N

City NEW YORK State NY Zip Code 10024

Purpose of Disbursement
Political Contribution

011
Category/
Type

Candidate Name
NADLER, JERROLD L., , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NY District: 10

Date of Disbursement
MM / DD / YYYY
10 / 08 / 2020

FEC Identification Number
C C00290825
Transaction ID : SB23.6976
Amount of Each Disbursement this Period
2500.00

Memo Item

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

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

7500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. PAUL TONKO FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 08 / 2020
Mailing Address 911 CENTRAL AVENUE # 221		FEC Identification Number C 000450049 Transaction ID : SB23.6985
City ALBANY State NY Zip Code 12206	Purpose of Disbursement Political Contribution	Amount of Each Disbursement this Period 5000.00
Candidate Name TONKO, PAUL DAVID, , ,	Category/Type 011	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. SCOTT PETERS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 08 / 2020
Mailing Address PO BOX 22074		FEC Identification Number C 000503110 Transaction ID : SB23.6967
City SAN DIEGO State CA Zip Code 92192	Purpose of Disbursement Political Contribution	Amount of Each Disbursement this Period 3500.00
Candidate Name PETERS, SCOTT, , ,	Category/Type 011	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 52	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. SUOZZI FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 08 / 2020
Mailing Address PO BOX 669		FEC Identification Number C 000607200 Transaction ID : SB23.6981
City GLEN COVE State NY Zip Code 11542	Purpose of Disbursement Political Contribution	Amount of Each Disbursement this Period 2500.00
Candidate Name SUOZZI, THOMAS, , ,	Category/Type 011	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 03	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

11000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. SUOZZI FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 08 / 2020
Mailing Address PO BOX 669		FEC Identification Number C00607200 Transaction ID : SB23.6984
City GLEN COVE	State NY	Zip Code 11542
Purpose of Disbursement Political Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2500.00
Candidate Name SUOZZI, THOMAS, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2020	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 03	

Full Name (Last, First, Middle Initial) B. TIM SCOTT FOR SENATE		Date of Disbursement MM / DD / YYYY 10 / 08 / 2020
Mailing Address 1405 ASHLEY RIVER RD		FEC Identification Number C00540302 Transaction ID : SB23.6961
City CHARLESTON	State SC	Zip Code 29407
Purpose of Disbursement Political Contribution	Category/ Type 011	Amount of Each Disbursement this Period 2500.00
Candidate Name SCOTT, TIMOTHY E, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2022	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SC	District: 00	

Full Name (Last, First, Middle Initial) C. WENSTRUP FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 08 / 2020
Mailing Address PO BOX 9551		FEC Identification Number C00497818 Transaction ID : SB23.6977
City CINCINNATI	State OH	Zip Code 45209
Purpose of Disbursement Political Contribution	Category/ Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name WENSTRUP, BRAD DR., , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2020	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 02	

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

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

6000.00
50000.00