

**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

AbbVie Political Action Committee

ADDRESS (number and street) ▼

1 N. Waukegan Road

☐ Check if different than previously reported. (ACC)

North Chicago

IL

60064

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00536573

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period 07 / 01 / 2015 through 07 / 31 / 2015

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 Denis Tian

Signature of Treasurer

Denis Tian

[Electronically Filed]

Date

08 /

18 /

2015

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AbbVie Political Action Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 07 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y  
 07 / 31 / 2015

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, 2015                                                                           |                         | 121598.98                         |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | 35449.16                |                                   |
| (c) Total Receipts (from Line 19) .....                                                                          | 88847.00                | 419152.18                         |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 124296.16               | 540751.16                         |
| 7. Total Disbursements (from Line 31) .....                                                                      | 36045.00                | 452500.00                         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 88251.16                | 88251.16                          |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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. 06/2004)

Page 3

Write or Type Committee Name

AbbVie Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
07 01 2015

To:

M M / D D / Y Y Y Y Y  
07 31 2015
**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).....

62134.89

226830.64

(ii) Unitemized .....

25961.40

186563.47

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

88096.29

413394.11

(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) ..... ▶

88096.29

413394.11

## 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.....

750.00

5750.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.71

8.07

## 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))..... ▶

88847.00

419152.18

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

88847.00

419152.18

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:                                                                    |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....                                                                        | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....                                                                    | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....                                                 | 45.00                         | 300.00                            |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 45.00                         | 300.00                            |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 19500.00                      | 372000.00                         |
| 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 .....                                                                  | 16500.00                      | 80200.00                          |
| 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)) ..      | 36045.00                      | 452500.00                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 36045.00                      | 452500.00                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures                                          | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|----------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 88096.29                      | 413394.11                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 88096.29                      | 413394.11                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 45.00                         | 300.00                            |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 45.00                         | 300.00                            |

# **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 402

(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Kent Abrahamson**

Mailing Address 1001 Ashley Ln

City State Zip Code  
 Libertyville IL 60048-3813

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Systems Eng. & Analytics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2015

Transaction ID : 7/16/2015 00000074

Amount of Each Receipt this Period

59.82

Full Name (Last, First, Middle Initial)

## **B. Kent Abrahamson**

Mailing Address 1001 Ashley Ln

City State Zip Code  
 Libertyville IL 60048-3813

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Systems Eng. & Analytics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

829.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2015

Transaction ID : 7/30/2015 00000074

Amount of Each Receipt this Period

59.82

Full Name (Last, First, Middle Initial)

## **C. Patricia M Adams**

Mailing Address 384 Dorchester Ln

City State Zip Code  
 Grayslake IL 60030-3429

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Communications, Compliance, M&A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 02 / 2015

Transaction ID : 7/2/2015 00000160

Amount of Each Receipt this Period

34.67

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

154.31

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Patricia M Adams**

Mailing Address 384 Dorchester Ln

City

Grayslake

State

IL

Zip Code

60030-3429

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Communications, Compliance, M&amp;A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.99

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000162

Amount of Each Receipt this Period

34.67

Full Name (Last, First, Middle Initial)

**B. Patricia M Adams**

Mailing Address 384 Dorchester Ln

City

Grayslake

State

IL

Zip Code

60030-3429

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Communications, Compliance, M&amp;A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.99

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000162

Amount of Each Receipt this Period

34.67

Full Name (Last, First, Middle Initial)

**C. Syed Alam**

Mailing Address 648 Raintree Ct

City

Buffalo Grove

State

IL

Zip Code

60089-6655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr Infrastructure Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.60

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00002038

Amount of Each Receipt this Period

42.72

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

112.06

**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 8 OF 402

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Carlos Alban**

Mailing Address 811 Woodstream Ct

City

Lake Forest

State

IL

Zip Code

60045-2768

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Evp, Global Commercial Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3137.54

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015\_00001075

Amount of Each Receipt this Period

224.11

Full Name (Last, First, Middle Initial)

**B. Carlos Alban**

Mailing Address 811 Woodstream Ct

City

Lake Forest

State

IL

Zip Code

60045-2768

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Evp, Global Commercial Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3137.54

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015\_00001086

Amount of Each Receipt this Period

224.11

Full Name (Last, First, Middle Initial)

**C. Carlos Alban**

Mailing Address 811 Woodstream Ct

City

Lake Forest

State

IL

Zip Code

60045-2768

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Evp, Global Commercial Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3137.54

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015\_00001084

Amount of Each Receipt this Period

224.11

SUBTOTAL of Receipts This Page (optional)..... ►

672.33

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 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Joseph V Ales**

Mailing Address 1115 E Juniper Ln

City

Mount Prospect

State

IL

Zip Code

60056-1421

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

QA Operations Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

215.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000767

Amount of Each Receipt this Period

35.99

Full Name (Last, First, Middle Initial)

**B. Vincent Amyot**

Mailing Address 1216 Canterbury Cir

City

Libertyville

State

IL

Zip Code

60048-3071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Sales Training

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00001826

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Vincent Amyot**

Mailing Address 1216 Canterbury Cir

City

Libertyville

State

IL

Zip Code

60048-3071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Sales Training

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00001843

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.99

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Vincent Amyot**

Mailing Address 1216 Canterbury Cir

City

Libertyville

State

IL

Zip Code

60048-3071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Sales Training

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001836

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Brittney J Anderson**

Mailing Address 34607 Calle Portola

City

Capistrano Beach

State

CA

Zip Code

92624-1045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist IV

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

315.96

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001512

Amount of Each Receipt this Period

21.72

Full Name (Last, First, Middle Initial)

**C. Brittney J Anderson**

Mailing Address 34607 Calle Portola

City

Capistrano Beach

State

CA

Zip Code

92624-1045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist IV

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

315.96

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001521

Amount of Each Receipt this Period

21.72

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

63.44

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Brittney J Anderson**

Mailing Address 34607 Calle Portola

City

Capistrano Beach

State

CA

Zip Code

92624-1045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist IV

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

315.96

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001518

Amount of Each Receipt this Period

21.72

Full Name (Last, First, Middle Initial)

**B. Scott C Anderson**

Mailing Address 34 Jamestown Ct

City

Grayslake

State

IL

Zip Code

60030-7920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Reg Aff Intl

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000023

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Scott C Anderson**

Mailing Address 34 Jamestown Ct

City

Grayslake

State

IL

Zip Code

60030-7920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Reg Aff Intl

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000023

Amount of Each Receipt this Period

30.00

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

81.72

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Scott C Anderson**

Mailing Address 34 Jamestown Ct

City

Grayslake

State

IL

Zip Code

60030-7920

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Reg Aff Intl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000023

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Veronica M Arroyave**

Mailing Address 843 Todd Ct

City

Deerfield

State

IL

Zip Code

60015-3203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Corp Resp &amp; Abv Foundation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.65

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00002072

Amount of Each Receipt this Period

69.33

Full Name (Last, First, Middle Initial)

**C. Veronica M Arroyave**

Mailing Address 843 Todd Ct

City

Deerfield

State

IL

Zip Code

60015-3203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Corp Resp &amp; Abv Foundation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.65

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00002089

Amount of Each Receipt this Period

69.33

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

168.66

**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 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Veronica M Arroyave**

Mailing Address 1124 Garfield Ave

City

Libertyville

State

IL

Zip Code

60048-3612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Corp Resp &amp; Abv Foundation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

346.65

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00002080

Amount of Each Receipt this Period

69.33

Full Name (Last, First, Middle Initial)

**B. Laurie A Asbeck-Hickman**

Mailing Address 7823 55th Ave

City

Kenosha

State

WI

Zip Code

53142-4151

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Marketing Ops

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

468.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00000280

Amount of Each Receipt this Period

31.44

Full Name (Last, First, Middle Initial)

**C. Laurie A Asbeck-Hickman**

Mailing Address 7823 55th Ave

City

Kenosha

State

WI

Zip Code

53142-4151

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Marketing Ops

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

468.36

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00000284

Amount of Each Receipt this Period

31.44

SUBTOTAL of Receipts This Page (optional)..... ►

132.21

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Laurie A Asbeck-Hickman**

Mailing Address 7823 55th Ave

City

Kenosha

State

WI

Zip Code

53142-4151

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Marketing Ops

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

468.36

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00000283**

Amount of Each Receipt this Period

31.44

Full Name (Last, First, Middle Initial)

**B. Walid M Awni**

Mailing Address 14105 Edgewater Ct

City

Libertyville

State

IL

Zip Code

60048-1593

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Clin Pharmacology Pharmacometrics

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

660.30

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00000125**

Amount of Each Receipt this Period

56.70

Full Name (Last, First, Middle Initial)

**C. Walid M Awni**

Mailing Address 14105 Edgewater Ct

City

Libertyville

State

IL

Zip Code

60048-1593

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Clin Pharmacology Pharmacometrics

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

660.30

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 6 |   |   | 2 | 0 | 1 |

**Transaction ID : 7/16/2015 00000126**

Amount of Each Receipt this Period

56.70

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

144.84

**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 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Walid M Awni**

Mailing Address 14105 Edgewater Ct

City

Libertyville

State

IL

Zip Code

60048-1593

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Clin Pharmacology Pharmacometrics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.30

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000126

Amount of Each Receipt this Period

56.70

Full Name (Last, First, Middle Initial)

**B. Bryan J Bagg**

Mailing Address 1441 Sutton Pl

City

Gurnee

State

IL

Zip Code

60031-9132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Global Rdtn Safety

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

746.91

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000509

Amount of Each Receipt this Period

50.09

Full Name (Last, First, Middle Initial)

**C. Bryan J Bagg**

Mailing Address 1441 Sutton Pl

City

Gurnee

State

IL

Zip Code

60031-9132

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Global Rdtn Safety

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

746.91

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000516

Amount of Each Receipt this Period

50.09

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

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

156.88

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 402  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Bryan J Bagg**

Mailing Address 1441 Sutton Pl

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-9132 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Global Rdtn Safety

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

746.91

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000515

Amount of Each Receipt this Period

50.09

Full Name (Last, First, Middle Initial)

**B. Paul Bagratuni**

Mailing Address 1094 S Western Ave

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Lake Forest | IL    | 60045-4038 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Tax Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.96

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00002099

Amount of Each Receipt this Period

68.32

Full Name (Last, First, Middle Initial)

**C. Nancy Rae Baker**

Mailing Address 1895 Royal Birkdale Dr

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Vernon Hills | IL    | 60061-4571 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Global Supply Chain

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.15

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000486

Amount of Each Receipt this Period

83.65

SUBTOTAL of Receipts This Page (optional)..... ►

202.06

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Nancy Rae Baker**

Mailing Address 1895 Royal Birkdale Dr

City

Vernon Hills

State

IL

Zip Code

60061-4571

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Global Supply Chain

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.15

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000493

Amount of Each Receipt this Period

83.65

Full Name (Last, First, Middle Initial)

**B. Nancy Rae Baker**

Mailing Address 1895 Royal Birkdale Dr

City

Vernon Hills

State

IL

Zip Code

60061-4571

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Global Supply Chain

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.15

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000492

Amount of Each Receipt this Period

93.69

Full Name (Last, First, Middle Initial)

**C. Jose L Bardina**

Mailing Address 437 Caren Dr

City

Buffalo Grove

State

IL

Zip Code

60089-1135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Technical Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.10

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000676

Amount of Each Receipt this Period

30.82

SUBTOTAL of Receipts This Page (optional)..... ►

208.16

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 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Deborah J Barnstable**

Mailing Address 370 Arborgate Ln

|               |       |            |
|---------------|-------|------------|
| City          | State | Zip Code   |
| Buffalo Grove | IL    | 60089-1602 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir App Tech Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015\_00000443

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**B. Deborah J Barnstable**

Mailing Address 370 Arborgate Ln

|               |       |            |
|---------------|-------|------------|
| City          | State | Zip Code   |
| Buffalo Grove | IL    | 60089-1602 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir App Tech Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015\_00000448

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

**C. Deborah J Barnstable**

Mailing Address 370 Arborgate Ln

|               |       |            |
|---------------|-------|------------|
| City          | State | Zip Code   |
| Buffalo Grove | IL    | 60089-1602 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir App Tech Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015\_00000447

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)..... ►

135.00

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 PageFOR LINE NUMBER: PAGE 19 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Yvonne G Barton**

Mailing Address 1708 High Lonesome

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Leander | TX    | 78641-3685 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Director, State Government Af

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.53

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00001544

Amount of Each Receipt this Period

46.09

Full Name (Last, First, Middle Initial)

**B. Yvonne G Barton**

Mailing Address 1708 High Lonesome

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Leander | TX    | 78641-3685 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Director, State Government Af

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.53

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00001556

Amount of Each Receipt this Period

46.09

Full Name (Last, First, Middle Initial)

**C. Yvonne G Barton**

Mailing Address 1708 High Lonesome

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Leander | TX    | 78641-3685 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Director, State Government Af

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.53

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00001553

Amount of Each Receipt this Period

46.09

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

138.27

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 PageFOR LINE NUMBER: PAGE 20 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Steven Bavaro**

Mailing Address 3730 Leather Leaf Ln

|                 |       |            |
|-----------------|-------|------------|
| City            | State | Zip Code   |
| Hoffman Estates | IL    | 60192-1533 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Ambassador Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.91

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00001592

Amount of Each Receipt this Period

27.61

Full Name (Last, First, Middle Initial)

**B. Steven Bavaro**

Mailing Address 3730 Leather Leaf Ln

|                 |       |            |
|-----------------|-------|------------|
| City            | State | Zip Code   |
| Hoffman Estates | IL    | 60192-1533 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Ambassador Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.91

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00001605

Amount of Each Receipt this Period

27.61

Full Name (Last, First, Middle Initial)

**C. Steven Bavaro**

Mailing Address 3730 Leather Leaf Ln

|                 |       |            |
|-----------------|-------|------------|
| City            | State | Zip Code   |
| Hoffman Estates | IL    | 60192-1533 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Ambassador Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.91

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00001601

Amount of Each Receipt this Period

27.61

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

82.83

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 402

☒ 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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

### A. Kevin R Behrens

Mailing Address 1761 Neuway Ln

City

Antioch

State

IL

Zip Code

60002-6213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

QA Device Products Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.74

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00000395

Amount of Each Receipt this Period

39.50

Full Name (Last, First, Middle Initial)

### B. Kevin R Behrens

Mailing Address 1761 Neuway Ln

City

Antioch

State

IL

Zip Code

60002-6213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

QA Device Products Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.74

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00000401

Amount of Each Receipt this Period

39.50

Full Name (Last, First, Middle Initial)

### C. Kevin R Behrens

Mailing Address 1761 Neuway Ln

City

Antioch

State

IL

Zip Code

60002-6213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

QA Device Products Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

487.74

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00000400

Amount of Each Receipt this Period

39.50

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

118.50

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 22 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Marvin K Bemby**

Mailing Address 37207 N Dillon Ct

City State Zip Code  
 Lake Villa IL 60046-1702

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Director, State Government Af

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2015

Transaction ID : 7/2/2015\_00000432

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Marvin K Bemby**

Mailing Address 37207 N Dillon Ct

City State Zip Code  
 Lake Villa IL 60046-1702

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Director, State Government Af

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 16 / 2015

Transaction ID : 7/16/2015\_00000437

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Marvin K Bemby**

Mailing Address 37207 N Dillon Ct

City State Zip Code  
 Lake Villa IL 60046-1702

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Director, State Government Af

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 30 / 2015

Transaction ID : 7/30/2015\_00000436

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 PageFOR LINE NUMBER: PAGE 23 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Debra Lynn Bender**

Mailing Address 2960 Americus Dr

City

Thompsons Station

State

TN

Zip Code

37179-9600

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Manager, MSL

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00000800**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Debra Lynn Bender**

Mailing Address 2960 Americus Dr

City

Thompsons Station

State

TN

Zip Code

37179-9600

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Manager, MSL

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 1 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00000811**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Debra Lynn Bender**

Mailing Address 2960 Americus Dr

City

Thompsons Station

State

TN

Zip Code

37179-9600

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Manager, MSL

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00000810**

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 24 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Vincent E Benegar**

Mailing Address 3405 W Taylor Ct

City State Zip Code  
 Visalia CA 93291-6557

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Uro/Gyn Specialist II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 02 / 2015

Transaction ID : 7/2/2015\_00001650

Amount of Each Receipt this Period

18.98

Full Name (Last, First, Middle Initial)

**B. Vincent E Benegar**

Mailing Address 3405 W Taylor Ct

City State Zip Code  
 Visalia CA 93291-6557

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Uro/Gyn Specialist II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2015

Transaction ID : 7/16/2015\_00001664

Amount of Each Receipt this Period

18.98

Full Name (Last, First, Middle Initial)

**C. Vincent E Benegar**

Mailing Address 3405 W Taylor Ct

City State Zip Code  
 Visalia CA 93291-6557

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Uro/Gyn Specialist II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.58

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2015

Transaction ID : 7/30/2015\_00001660

Amount of Each Receipt this Period

18.98

SUBTOTAL of Receipts This Page (optional)..... ►

56.94

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 25 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Richard Frederick Benton**

Mailing Address 26 Deerfield Dr

City

Hawthorn Woods

State

IL

Zip Code

60047-6507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Director, Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00001925

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Richard Frederick Benton**

Mailing Address 26 Deerfield Dr

City

Hawthorn Woods

State

IL

Zip Code

60047-6507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Director, Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00001941

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Richard Frederick Benton**

Mailing Address 26 Deerfield Dr

City

Hawthorn Woods

State

IL

Zip Code

60047-6507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Director, Security

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00001934

Amount of Each Receipt this Period

20.00

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

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

60.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Heide Foerster Betman**

Mailing Address 2707 35th St

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Oak Brook | IL    | 60523-2612 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Med Dir, Pharmacovigilance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.76

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015\_00001944

Amount of Each Receipt this Period

40.94

Full Name (Last, First, Middle Initial)

**B. Heide Foerster Betman**

Mailing Address 2707 35th St

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Oak Brook | IL    | 60523-2612 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Med Dir, Pharmacovigilance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.76

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015\_00001960

Amount of Each Receipt this Period

40.94

Full Name (Last, First, Middle Initial)

**C. Heide Foerster Betman**

Mailing Address 2707 35th St

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Oak Brook | IL    | 60523-2612 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Med Dir, Pharmacovigilance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.76

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015\_00001953

Amount of Each Receipt this Period

40.94

SUBTOTAL of Receipts This Page (optional)..... ►

122.82

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 27 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. David C Birkhold**

Mailing Address 211 Lawndale St

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Wilmette | IL    | 60091-3212 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Lc Site Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.77

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00000681

Amount of Each Receipt this Period

46.07

Full Name (Last, First, Middle Initial)

**B. David C Birkhold**

Mailing Address 211 Lawndale St

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Wilmette | IL    | 60091-3212 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Lc Site Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.77

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00000690

Amount of Each Receipt this Period

46.07

Full Name (Last, First, Middle Initial)

**C. David C Birkhold**

Mailing Address 211 Lawndale St

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Wilmette | IL    | 60091-3212 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Lc Site Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

682.77

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00000689

Amount of Each Receipt this Period

46.07

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

138.21

**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: PAGE 28 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. James M Birmingham**

Mailing Address 768 Alleghany Rd

City

Grayslake

State

IL

Zip Code

60030-3830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Sales Trng Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

455.19

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00001511**

Amount of Each Receipt this Period

30.85

Full Name (Last, First, Middle Initial)

**B. James M Birmingham**

Mailing Address 768 Alleghany Rd

City

Grayslake

State

IL

Zip Code

60030-3830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Sales Trng Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

455.19

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00001520**

Amount of Each Receipt this Period

30.85

Full Name (Last, First, Middle Initial)

**C. James M Birmingham**

Mailing Address 768 Alleghany Rd

City

Grayslake

State

IL

Zip Code

60030-3830

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Sales Trng Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

455.19

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00001517**

Amount of Each Receipt this Period

30.85

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

92.55

**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 29 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Fred W. Blakeslee**

Mailing Address 750 Price Ln

City

Deerfield

State

IL

Zip Code

60015-4177

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

526.89

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00002057

Amount of Each Receipt this Period

75.27

Full Name (Last, First, Middle Initial)

**B. Fred W. Blakeslee**

Mailing Address 750 Price Ln

City

Deerfield

State

IL

Zip Code

60015-4177

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

526.89

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00002073

Amount of Each Receipt this Period

75.27

Full Name (Last, First, Middle Initial)

**C. Fred W. Blakeslee**

Mailing Address 750 Price Ln

City

Deerfield

State

IL

Zip Code

60015-4177

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

526.89

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00002064

Amount of Each Receipt this Period

75.27

SUBTOTAL of Receipts This Page (optional)..... ►

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

225.81

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

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

FOR LINE NUMBER: PAGE 30 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jeffrey S Bomer

Mailing Address 157 Mora Rd

City

Carpentersville

State

IL

Zip Code

60110-1135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Systems Admin - Windows

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

264.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00001617

Amount of Each Receipt this Period

17.84

Full Name (Last, First, Middle Initial)

B. Jeffrey S Bomer

Mailing Address 157 Mora Rd

City

Carpentersville

State

IL

Zip Code

60110-1135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Systems Admin - Windows

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

264.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00001630

Amount of Each Receipt this Period

17.84

Full Name (Last, First, Middle Initial)

C. Jeffrey S Bomer

Mailing Address 157 Mora Rd

City

Carpentersville

State

IL

Zip Code

60110-1135

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Systems Admin - Windows

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

264.48

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00001626

Amount of Each Receipt this Period

17.84

SUBTOTAL of Receipts This Page (optional)..... ►

53.52

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Michael J Bowker**

Mailing Address 202 Spring Valley Way

City

Round Lake

State

IL

Zip Code

60073-9542

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Finance Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001672

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Pearson Nathaniel Bownas**

Mailing Address 1502 Old Peterson Rd

City

Libertyville

State

IL

Zip Code

60048-4343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Legal, Litigation, Compliance &amp; Re

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1017.66

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001928

Amount of Each Receipt this Period

145.38

Full Name (Last, First, Middle Initial)

**C. Pearson Nathaniel Bownas**

Mailing Address 1502 Old Peterson Rd

City

Libertyville

State

IL

Zip Code

60048-4343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Legal, Litigation, Compliance &amp; Re

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1017.66

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001944

Amount of Each Receipt this Period

145.38

SUBTOTAL of Receipts This Page (optional)..... ►

310.76

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Pearson Nathaniel Bownas**

Mailing Address 1502 Old Peterson Rd

City

Libertyville

State

IL

Zip Code

60048-4343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Legal, Litigation, Compliance &amp; Re

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1017.66

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001937

Amount of Each Receipt this Period

145.38

Full Name (Last, First, Middle Initial)

**B. Michael David Boyd**

Mailing Address 217 E Washington Ave

City

Lake Bluff

State

IL

Zip Code

60044-2156

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3457.72

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001983

Amount of Each Receipt this Period

246.98

Full Name (Last, First, Middle Initial)

**C. Michael David Boyd**

Mailing Address 217 E Washington Ave

City

Lake Bluff

State

IL

Zip Code

60044-2156

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3457.72

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00002000

Amount of Each Receipt this Period

246.98

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

639.34

**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 33 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael David Boyd**

Mailing Address 217 E Washington Ave

City

Lake Bluff

State

IL

Zip Code

60044-2156

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3457.72

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00001992

Amount of Each Receipt this Period

246.98

Full Name (Last, First, Middle Initial)

**B. Thomas Joseph Boyle**

Mailing Address 609 Hillcrest Dr

City

Libertyville

State

IL

Zip Code

60048-1721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr Sales Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649.59

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000293

Amount of Each Receipt this Period

64.57

Full Name (Last, First, Middle Initial)

**c. Thomas Joseph Boyle**

Mailing Address 609 Hillcrest Dr

City

Libertyville

State

IL

Zip Code

60048-1721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr Sales Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649.59

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000297

Amount of Each Receipt this Period

64.57

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

376.12

**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 PageFOR LINE NUMBER: PAGE 34 OF 402  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Thomas Joseph Boyle**

Mailing Address 609 Hillcrest Dr

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-1721 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr Sales Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

649.59

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000296

Amount of Each Receipt this Period

64.57

Full Name (Last, First, Middle Initial)

**B. William M Bracken**

Mailing Address 340 Ambria Dr

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Mundelein | IL    | 60060-4804 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Sci Prg Mgt Pc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000612

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. William M Bracken**

Mailing Address 340 Ambria Dr

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Mundelein | IL    | 60060-4804 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Sci Prg Mgt Pc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000621

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

114.57

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 PageFOR LINE NUMBER: PAGE 35 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. William M Bracken**

Mailing Address 340 Ambria Dr

City

Mundelein

State

IL

Zip Code

60060-4804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Sci Prg Mgt Pc

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000620

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Laura A. Brake**Mailing Address 1019 W Monroe St  
Unit 4E

City

Chicago

State

IL

Zip Code

60607-2880

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

326.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 6 |   |   |   |   |   |

Transaction ID : 7/16/2015 00002078

Amount of Each Receipt this Period

65.21

Full Name (Last, First, Middle Initial)

**C. Laura A. Brake**Mailing Address 1019 W Monroe St  
Unit 4E

City

Chicago

State

IL

Zip Code

60607-2880

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

326.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00002069

Amount of Each Receipt this Period

65.21

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

155.42

**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 PageFOR LINE NUMBER: PAGE 36 OF 402  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Lisa M Breland**

Mailing Address 5520 2nd St NW

City

Washington

State

DC

Zip Code

20011-5212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Specialty Rep III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 02    |   | 2015        |

Transaction ID : 7/2/2015\_00000830

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Lisa M Breland**

Mailing Address 5520 2nd St NW

City

Washington

State

DC

Zip Code

20011-5212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Specialty Rep III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 16    |   | 2015        |

Transaction ID : 7/16/2015\_00000841

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Lisa M Breland**

Mailing Address 5520 2nd St NW

City

Washington

State

DC

Zip Code

20011-5212

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Specialty Rep III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 30    |   | 2015        |

Transaction ID : 7/30/2015\_00000840

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. John J Brennan**

Mailing Address 1709 Tall Pine Way

City

Libertyville

State

IL

Zip Code

60048-3562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Dir I

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 |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00001854

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. John J Brennan**

Mailing Address 1709 Tall Pine Way

City

Libertyville

State

IL

Zip Code

60048-3562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Dir I

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 |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00001870

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. John J Brennan**

Mailing Address 1709 Tall Pine Way

City

Libertyville

State

IL

Zip Code

60048-3562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Dir I

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 |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00001863

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Michael A Brodsky**

Mailing Address 10 Oakside Rd

City

Smithtown

State

NY

Zip Code

11787-1549

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sales Director-PPD

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 |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00001353

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Michael A Brodsky**

Mailing Address 10 Oakside Rd

City

Smithtown

State

NY

Zip Code

11787-1549

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sales Director-PPD

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 |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00001364

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Michael A Brodsky**

Mailing Address 10 Oakside Rd

City

Smithtown

State

NY

Zip Code

11787-1549

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sales Director-PPD

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 |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00001363

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

60.00

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

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

FOR LINE NUMBER: PAGE 39 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

A. Allan Anders Brookes

Mailing Address 35 Oak Hill Rd

City

Fayville

State

MA

Zip Code

01745-1012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sect Head Legal

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1467.66

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00001758

Amount of Each Receipt this Period

99.12

Full Name (Last, First, Middle Initial)

B. Allan Anders Brookes

Mailing Address 35 Oak Hill Rd

City

Fayville

State

MA

Zip Code

01745-1012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sect Head Legal

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1467.66

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00001775

Amount of Each Receipt this Period

99.12

Full Name (Last, First, Middle Initial)

C. Allan Anders Brookes

Mailing Address 35 Oak Hill Rd

City

Fayville

State

MA

Zip Code

01745-1012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sect Head Legal

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1467.66

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00001768

Amount of Each Receipt this Period

99.12

SUBTOTAL of Receipts This Page (optional)..... ►

297.36

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 40 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Andrew W Brown**

Mailing Address 402 W Noyes St

City

Arlington Heights

State

IL

Zip Code

60005-3640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Compensation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00000307

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Andrew W Brown**

Mailing Address 402 W Noyes St

City

Arlington Heights

State

IL

Zip Code

60005-3640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Compensation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00000311

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Andrew W Brown**

Mailing Address 402 W Noyes St

City

Arlington Heights

State

IL

Zip Code

60005-3640

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Compensation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00000310

Amount of Each Receipt this Period

25.00

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

75.00

**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 41 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Sandra May Brown**

Mailing Address 23915 N River Rd

City State Zip Code  
 Cary IL 60013-9608

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Reg Affairs Assoc Dir

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  
 07 / 02 / 2015

Transaction ID : 7/2/2015\_00001920

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Sandra May Brown**

Mailing Address 23915 N River Rd

City State Zip Code  
 Cary IL 60013-9608

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Reg Affairs Assoc Dir

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  
 07 / 16 / 2015

Transaction ID : 7/16/2015\_00001936

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Sandra May Brown**

Mailing Address 23915 N River Rd

City State Zip Code  
 Cary IL 60013-9608

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Reg Affairs Assoc Dir

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  
 07 / 30 / 2015

Transaction ID : 7/30/2015\_00001929

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 42 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Scott Curtis Brun**

Mailing Address 31048 Prairie Ridge Rd

City

Libertyville

State

IL

Zip Code

60048-4898

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Pharma Clinical Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00000744

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Scott Curtis Brun**

Mailing Address 31048 Prairie Ridge Rd

City

Libertyville

State

IL

Zip Code

60048-4898

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Pharma Clinical Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00000754

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Scott Curtis Brun**

Mailing Address 31048 Prairie Ridge Rd

City

Libertyville

State

IL

Zip Code

60048-4898

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Pharma Clinical Dev

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00000753

Amount of Each Receipt this Period

40.00

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

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

120.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 43 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jennie L Bucciero**

Mailing Address 917 Springhaven Dr

City

Libertyville

State

IL

Zip Code

60048-3806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Master Black Belt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

704.66

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00001745**

Amount of Each Receipt this Period

64.62

Full Name (Last, First, Middle Initial)

**B. Jennie L Bucciero**

Mailing Address 917 Springhaven Dr

City

Libertyville

State

IL

Zip Code

60048-3806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Master Black Belt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

704.66

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00001761**

Amount of Each Receipt this Period

64.62

Full Name (Last, First, Middle Initial)

**C. Jennie L Bucciero**

Mailing Address 917 Springhaven Dr

City

Libertyville

State

IL

Zip Code

60048-3806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Master Black Belt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

704.66

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00001754**

Amount of Each Receipt this Period

64.62

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

193.86

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Kevin K Buckbee**

Mailing Address 530 Lake Ave

City

Wilmette

State

IL

Zip Code

60091-1930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP US, Controller

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1874.76

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000051

Amount of Each Receipt this Period

126.70

Full Name (Last, First, Middle Initial)

**B. Kevin K Buckbee**

Mailing Address 530 Lake Ave

City

Wilmette

State

IL

Zip Code

60091-1930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP US, Controller

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1874.76

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000052

Amount of Each Receipt this Period

126.70

Full Name (Last, First, Middle Initial)

**C. Kevin K Buckbee**

Mailing Address 530 Lake Ave

City

Wilmette

State

IL

Zip Code

60091-1930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP US, Controller

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1874.76

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000052

Amount of Each Receipt this Period

126.70

SUBTOTAL of Receipts This Page (optional)..... ►

380.10

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 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Anna Elizabeth Bukszar**

Mailing Address 2501 Riverwoods Rd

City

Riverwoods

State

IL

Zip Code

60015-1952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Business Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1997.40

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00001485

Amount of Each Receipt this Period

135.24

Full Name (Last, First, Middle Initial)

**B. Anna Elizabeth Bukszar**

Mailing Address 2501 Riverwoods Rd

City

Riverwoods

State

IL

Zip Code

60015-1952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Business Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1997.40

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00001494

Amount of Each Receipt this Period

135.24

Full Name (Last, First, Middle Initial)

**C. Anna Elizabeth Bukszar**

Mailing Address 2501 Riverwoods Rd

City

Riverwoods

State

IL

Zip Code

60015-1952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Business Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1997.40

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00001492

Amount of Each Receipt this Period

135.24

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

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

405.72

# **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 46 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael A Burger**

Mailing Address 1455 Arcady Dr

City

Lake Forest

State

IL

Zip Code

60045-3609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Sales Training

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.54

Date of Receipt

MM / DD / YYYY  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00001132

Amount of Each Receipt this Period

34.60

Full Name (Last, First, Middle Initial)

**B. Michael A Burger**

Mailing Address 1455 Arcady Dr

City

Lake Forest

State

IL

Zip Code

60045-3609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Sales Training

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.54

Date of Receipt

MM / DD / YYYY  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00001144

Amount of Each Receipt this Period

34.60

Full Name (Last, First, Middle Initial)

**C. Michael A Burger**

Mailing Address 1455 Arcady Dr

City

Lake Forest

State

IL

Zip Code

60045-3609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Sales Training

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.54

Date of Receipt

MM / DD / YYYY  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00001142

Amount of Each Receipt this Period

34.60

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

103.80

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Daniel M Burke**

Mailing Address 1209 Sussex Ln

City

Libertyville

State

IL

Zip Code

60048-1248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir IS Global Implementation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1149.27

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000623

Amount of Each Receipt this Period

77.37

Full Name (Last, First, Middle Initial)

**B. Daniel M Burke**

Mailing Address 1209 Sussex Ln

City

Libertyville

State

IL

Zip Code

60048-1248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir IS Global Implementation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1149.27

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000633

Amount of Each Receipt this Period

77.37

Full Name (Last, First, Middle Initial)

**C. Daniel M Burke**

Mailing Address 1209 Sussex Ln

City

Libertyville

State

IL

Zip Code

60048-1248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir IS Global Implementation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1149.27

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000632

Amount of Each Receipt this Period

77.37

SUBTOTAL of Receipts This Page (optional)..... ►

232.11

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. James Burket**

Mailing Address 10 Sezanne Cv

City

Little Rock

State

AR

Zip Code

72223-5093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

252.81

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00001897

Amount of Each Receipt this Period

17.05

Full Name (Last, First, Middle Initial)

**B. James Burket**

Mailing Address 10 Sezanne Cv

City

Little Rock

State

AR

Zip Code

72223-5093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

252.81

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00001913

Amount of Each Receipt this Period

17.05

Full Name (Last, First, Middle Initial)

**C. James Burket**

Mailing Address 10 Sezanne Cv

City

Little Rock

State

AR

Zip Code

72223-5093

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

252.81

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00001906

Amount of Each Receipt this Period

17.05

SUBTOTAL of Receipts This Page (optional)..... ►

51.15

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 402

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Nancy Elizabeth Burton**

Mailing Address 323 Laurel Ave

City

Libertyville

State

IL

Zip Code

60048-2129

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Ethics &amp; Compliance US &amp; PR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1651.41

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 02    |   | 2015        |

Transaction ID : 7/2/2015\_00001576

Amount of Each Receipt this Period

111.39

Full Name (Last, First, Middle Initial)

**B. Nancy Elizabeth Burton**

Mailing Address 323 Laurel Ave

City

Libertyville

State

IL

Zip Code

60048-2129

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Ethics &amp; Compliance US &amp; PR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1651.41

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 16    |   | 2015        |

Transaction ID : 7/16/2015\_00001589

Amount of Each Receipt this Period

111.39

Full Name (Last, First, Middle Initial)

**C. Nancy Elizabeth Burton**

Mailing Address 323 Laurel Ave

City

Libertyville

State

IL

Zip Code

60048-2129

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Ethics &amp; Compliance US &amp; PR

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1651.41

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 30    |   | 2015        |

Transaction ID : 7/30/2015\_00001585

Amount of Each Receipt this Period

111.39

SUBTOTAL of Receipts This Page (optional)..... ►

334.17

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 50 OF 402

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jacqueline Marie Butler**

Mailing Address 43567 Wild Indigo Ter

City

Leesburg

State

VA

Zip Code

20176-8461

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Uro/Gyn Specialist II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

307.59

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 02    |   | 2015        |

**Transaction ID : 7/2/2015\_00001212**

Amount of Each Receipt this Period

20.73

Full Name (Last, First, Middle Initial)

**B. Jacqueline Marie Butler**

Mailing Address 43567 Wild Indigo Ter

City

Leesburg

State

VA

Zip Code

20176-8461

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Uro/Gyn Specialist II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

307.59

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 16    |   | 2015        |

**Transaction ID : 7/16/2015\_00001224**

Amount of Each Receipt this Period

20.73

Full Name (Last, First, Middle Initial)

**C. Jacqueline Marie Butler**

Mailing Address 43567 Wild Indigo Ter

City

Leesburg

State

VA

Zip Code

20176-8461

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Uro/Gyn Specialist II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

307.59

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 30    |   | 2015        |

**Transaction ID : 7/30/2015\_00001223**

Amount of Each Receipt this Period

20.73

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

62.19

**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 51 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Susan Callery-D'Amico**

Mailing Address 1570 Littlefield Ct

City

Lake Forest

State

IL

Zip Code

60045-3244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, R&amp;D Quality Assurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.40

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00001992

Amount of Each Receipt this Period

61.68

Full Name (Last, First, Middle Initial)

**B. Susan Callery-D'Amico**

Mailing Address 1570 Littlefield Ct

City

Lake Forest

State

IL

Zip Code

60045-3244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, R&amp;D Quality Assurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.40

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00002008

Amount of Each Receipt this Period

61.68

Full Name (Last, First, Middle Initial)

**C. Susan Callery-D'Amico**

Mailing Address 1570 Littlefield Ct

City

Lake Forest

State

IL

Zip Code

60045-3244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, R&amp;D Quality Assurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.40

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00002000

Amount of Each Receipt this Period

61.68

SUBTOTAL of Receipts This Page (optional)..... ►

185.04

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 PageFOR LINE NUMBER: PAGE 52 OF 402  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Sally Canfield**

Mailing Address 214 E Monroe Ave

City

Alexandria

State

VA

Zip Code

22301-1820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie, Inc.

Occupation

Sr. Director, International Government

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1467.34

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00002092**

Amount of Each Receipt this Period

104.81

Full Name (Last, First, Middle Initial)

**B. Sally Canfield**

Mailing Address 214 E Monroe Ave

City

Alexandria

State

VA

Zip Code

22301-1820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie, Inc.

Occupation

Sr. Director, International Government

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1467.34

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00002109**

Amount of Each Receipt this Period

104.81

Full Name (Last, First, Middle Initial)

**C. Sally Canfield**

Mailing Address 214 E Monroe Ave

City

Alexandria

State

VA

Zip Code

22301-1820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie, Inc.

Occupation

Sr. Director, International Government

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1467.34

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00002100**

Amount of Each Receipt this Period

104.81

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

314.43

**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 53 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael Scott Carlin**

Mailing Address 2326 Central Park Ave

City

Evanston

State

IL

Zip Code

60201-1810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP IT Research & Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.59

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00000695

Amount of Each Receipt this Period

57.37

Full Name (Last, First, Middle Initial)

**B. Michael Scott Carlin**

Mailing Address 2326 Central Park Ave

City

Evanston

State

IL

Zip Code

60201-1810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP IT Research & Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.59

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00000704

Amount of Each Receipt this Period

57.37

Full Name (Last, First, Middle Initial)

**C. Michael Scott Carlin**

Mailing Address 2326 Central Park Ave

City

Evanston

State

IL

Zip Code

60201-1810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP IT Research & Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

561.59

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00000703

Amount of Each Receipt this Period

57.37

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

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

172.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Thomas R Carney**

Mailing Address 7712 Cascade Way

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-4061 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

973.53

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000682

Amount of Each Receipt this Period

66.12

Full Name (Last, First, Middle Initial)

**B. Thomas R Carney**

Mailing Address 7712 Cascade Way

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-4061 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

973.53

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000691

Amount of Each Receipt this Period

66.12

Full Name (Last, First, Middle Initial)

**C. Thomas R Carney**

Mailing Address 7712 Cascade Way

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-4061 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Finance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

973.53

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000690

Amount of Each Receipt this Period

66.12

SUBTOTAL of Receipts This Page (optional)..... ►

198.36

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 PageFOR LINE NUMBER: PAGE 55 OF 402  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Dean Michael Caselli**

Mailing Address 241 Buckingham Dr

City

Grayslake

State

IL

Zip Code

60030-3476

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, HR Services

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1100.04

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015\_00001715**

Amount of Each Receipt this Period

74.76

Full Name (Last, First, Middle Initial)

**B. Dean Michael Caselli**

Mailing Address 241 Buckingham Dr

City

Grayslake

State

IL

Zip Code

60030-3476

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, HR Services

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1100.04

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015\_00001731**

Amount of Each Receipt this Period

74.76

Full Name (Last, First, Middle Initial)

**C. Dean Michael Caselli**

Mailing Address 241 Buckingham Dr

City

Grayslake

State

IL

Zip Code

60030-3476

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, HR Services

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1100.04

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015\_00001724**

Amount of Each Receipt this Period

74.76

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

224.28

**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 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Hernan Castellon**

Mailing Address 8931 SW 17th St

City State Zip Code  
Miami FL 33165-7811

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00000933

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Hernan Castellon**

Mailing Address 8931 SW 17th St

City State Zip Code  
Miami FL 33165-7811

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00000944

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Hernan Castellon**

Mailing Address 8931 SW 17th St

City State Zip Code  
Miami FL 33165-7811

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00000942

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Jeffrey J Cercy**Mailing Address 1604 Brittany Ct  
Apt B2

City Wheeling State IL Zip Code 60090-6987

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00000912

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Jeffrey J Cercy**Mailing Address 1604 Brittany Ct  
Apt B2

City Wheeling State IL Zip Code 60090-6987

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00000923

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Jeffrey J Cercy**Mailing Address 1604 Brittany Ct  
Apt B2

City Wheeling State IL Zip Code 60090-6987

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sales Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00000921

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

300.00

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 58 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. William J Chase**

Mailing Address 1328 Elmwood Ave

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Wilmette | IL    | 60091-1649 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Evp, Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3769.22

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015\_00000166

Amount of Each Receipt this Period

269.23

Full Name (Last, First, Middle Initial)

**B. William J Chase**

Mailing Address 1328 Elmwood Ave

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Wilmette | IL    | 60091-1649 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Evp, Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3769.22

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015\_00000168

Amount of Each Receipt this Period

269.23

Full Name (Last, First, Middle Initial)

**C. William J Chase**

Mailing Address 1328 Elmwood Ave

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Wilmette | IL    | 60091-1649 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Evp, Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3769.22

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015\_00000168

Amount of Each Receipt this Period

269.23

SUBTOTAL of Receipts This Page (optional)..... ►

807.69

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: PAGE 59 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Portia Chen**

Mailing Address 1137 Winwood Dr

City State Zip Code  
 Lake Forest IL 60045-1158

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Division Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1318.71

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2015

Transaction ID : 7/2/2015\_00000419

Amount of Each Receipt this Period

88.95

Full Name (Last, First, Middle Initial)

**B. Portia Chen**

Mailing Address 1137 Winwood Dr

City State Zip Code  
 Lake Forest IL 60045-1158

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Division Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1318.71

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 16 / 2015

Transaction ID : 7/16/2015\_00000424

Amount of Each Receipt this Period

88.95

Full Name (Last, First, Middle Initial)

**C. Portia Chen**

Mailing Address 1137 Winwood Dr

City State Zip Code  
 Lake Forest IL 60045-1158

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Division Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1318.71

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 30 / 2015

Transaction ID : 7/30/2015\_00000423

Amount of Each Receipt this Period

88.95

SUBTOTAL of Receipts This Page (optional)..... ►

266.85

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Marc Gregory Cherubini**

Mailing Address 416 Lake Estate Dr

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Chapin | SC    | 29036-7662 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.01

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00001966

Amount of Each Receipt this Period

46.65

Full Name (Last, First, Middle Initial)

**B. Marc Gregory Cherubini**

Mailing Address 416 Lake Estate Dr

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Chapin | SC    | 29036-7662 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.01

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00001983

Amount of Each Receipt this Period

46.65

Full Name (Last, First, Middle Initial)

**C. Marc Gregory Cherubini**

Mailing Address 416 Lake Estate Dr

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Chapin | SC    | 29036-7662 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.01

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00001976

Amount of Each Receipt this Period

46.65

SUBTOTAL of Receipts This Page (optional)..... ►

139.95

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 61 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Bennie Heath Childs**

Mailing Address 1014 Fawn Dr

City

Tupelo

State

MS

Zip Code

38804-1924

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

212.55

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00001871

Amount of Each Receipt this Period

14.17

Full Name (Last, First, Middle Initial)

## **B. Carol S Chiles**

Mailing Address 525 Hinman Ave  
Apt 3S

City

Evanston

State

IL

Zip Code

60202-3006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Corp Fac Plng

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

226.20

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00002047

Amount of Each Receipt this Period

45.24

Full Name (Last, First, Middle Initial)

## **C. Jayne Christenson**

Mailing Address 132 49th St

City

Holmes Beach

State

FL

Zip Code

34217-1867

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

585.30

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000941

Amount of Each Receipt this Period

39.44

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

98.85

**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 62 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jayne Christenson

Mailing Address 132 49th St

City

Holmes Beach

State

FL

Zip Code

34217-1867

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

585.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00000952

Amount of Each Receipt this Period

39.44

Full Name (Last, First, Middle Initial)

B. Jayne Christenson

Mailing Address 132 49th St

City

Holmes Beach

State

FL

Zip Code

34217-1867

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

585.30

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000950

Amount of Each Receipt this Period

39.44

Full Name (Last, First, Middle Initial)

C. Wesley Keith Church

Mailing Address 339 Crawford St

City

Northborough

State

MA

Zip Code

01532-1236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Biologics CMC Prog Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

314.22

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00001938

Amount of Each Receipt this Period

49.37

SUBTOTAL of Receipts This Page (optional)..... ►

128.25

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 63 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Wesley Keith Church**

Mailing Address 339 Crawford St

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Northborough | MA    | 01532-1236 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Biologics CMC Prog Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.22

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001954

Amount of Each Receipt this Period

49.37

Full Name (Last, First, Middle Initial)

**B. Wesley Keith Church**

Mailing Address 339 Crawford St

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Northborough | MA    | 01532-1236 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Biologics CMC Prog Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.22

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001947

Amount of Each Receipt this Period

49.37

Full Name (Last, First, Middle Initial)

**C. Carla Clark**

Mailing Address 773 Cypress Knoll Dr

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| O Fallon | MO    | 63368-8169 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Virology Sales Specialist IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000982

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

118.74

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 PageFOR LINE NUMBER: PAGE 64 OF 402  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Carla Clark**

Mailing Address 773 Cypress Knoll Dr

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| O Fallon | MO    | 63368-8169 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Virology Sales Specialist IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000993

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Carla Clark**

Mailing Address 773 Cypress Knoll Dr

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| O Fallon | MO    | 63368-8169 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Virology Sales Specialist IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000991

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Paula D Clunk**

Mailing Address 8360 E Tether Trl

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Scottsdale | AZ    | 85255-1426 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

HCV Account Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000989

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 65 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Paula D Clunk**

Mailing Address 8360 E Tether Trl

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Scottsdale | AZ    | 85255-1426 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

HCV Account Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001000

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Paula D Clunk**

Mailing Address 8360 E Tether Trl

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Scottsdale | AZ    | 85255-1426 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

HCV Account Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000998

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Stephanie W Colelli**

Mailing Address 106 Oak Creek Ln

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| League City | TX    | 77573-1789 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.74

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00001864

Amount of Each Receipt this Period

36.18

SUBTOTAL of Receipts This Page (optional)..... ►

76.18

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 66 OF 402

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Stephanie W Colelli**

Mailing Address 106 Oak Creek Ln

City

State

Zip Code

League City

TX

77573-1789

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

AbbVie Inc.

Prof Pharma Rep IV

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

535.74

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    | / | 16    | / | 2015      |

**Transaction ID : 7/16/2015 00001880**

Amount of Each Receipt this Period

36.18

Full Name (Last, First, Middle Initial)

**B. Stephanie W Colelli**

Mailing Address 106 Oak Creek Ln

City

State

Zip Code

League City

TX

77573-1789

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

AbbVie Inc.

Prof Pharma Rep IV

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

535.74

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    | / | 30    | / | 2015      |

**Transaction ID : 7/30/2015 00001873**

Amount of Each Receipt this Period

36.18

Full Name (Last, First, Middle Initial)

**C. Carole L Coleman**

Mailing Address 41880 N Pedersen Dr S

City

State

Zip Code

Antioch

IL

60002-9522

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

AbbVie Inc.

Dir Study Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

528.36

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    | / | 02    | / | 2015      |

**Transaction ID : 7/2/2015 00000652**

Amount of Each Receipt this Period

35.64

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

108.00

**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 67 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Carole L Coleman**

Mailing Address 41880 N Pedersen Dr S

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Antioch | IL    | 60002-9522 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Study Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.36

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000661

Amount of Each Receipt this Period

35.64

Full Name (Last, First, Middle Initial)

**B. Carole L Coleman**

Mailing Address 41880 N Pedersen Dr S

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Antioch | IL    | 60002-9522 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Study Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

528.36

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000660

Amount of Each Receipt this Period

35.64

Full Name (Last, First, Middle Initial)

**C. Maureen R Conley**

Mailing Address 1309 Hackberry Ct

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-5316 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

GM Sales &amp; Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.36

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000284

Amount of Each Receipt this Period

60.24

SUBTOTAL of Receipts This Page (optional)..... ►

131.52

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Maureen R Conley**

Mailing Address 1309 Hackberry Ct

City

Libertyville

State

IL

Zip Code

60048-5316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

GM Sales &amp; Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.36

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000288

Amount of Each Receipt this Period

60.24

Full Name (Last, First, Middle Initial)

**B. Maureen R Conley**

Mailing Address 1309 Hackberry Ct

City

Libertyville

State

IL

Zip Code

60048-5316

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

GM Sales &amp; Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

891.36

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000287

Amount of Each Receipt this Period

60.24

Full Name (Last, First, Middle Initial)

**C. Adam B. Conway**

Mailing Address 5810 N Kirby Ave

City

Chicago

State

IL

Zip Code

60646-6627

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00002007

Amount of Each Receipt this Period

49.32

SUBTOTAL of Receipts This Page (optional)..... ►

169.80

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 69 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Adam B. Conway**

Mailing Address 5810 N Kirby Ave

City State Zip Code  
Chicago IL 60646-6627

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 16 2015

Transaction ID : 7/16/2015 00002023

Amount of Each Receipt this Period

49.32

Full Name (Last, First, Middle Initial)

**B. Adam B. Conway**

Mailing Address 2480 Green Bay Rd

City State Zip Code  
Highland Park IL 60035-1953

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

729.12

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 30 2015

Transaction ID : 7/30/2015 00002015

Amount of Each Receipt this Period

49.32

Full Name (Last, First, Middle Initial)

**C. Amy Beth Cook**

Mailing Address 1720 Elmwood Ave

City State Zip Code  
Wilmette IL 60091-1556

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Division Counsel

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  
07 30 2015

Transaction ID : 7/30/2015 00001950

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

108.64

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

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

FOR LINE NUMBER: PAGE 70 OF 402  
(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Moon J Cook**

Mailing Address 1848 Richmond Ln

City State Zip Code  
 Long Grove IL 60047-5147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, International Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 02 / 2015

**Transaction ID : 7/2/2015\_00001615**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Moon J Cook**

Mailing Address 1848 Richmond Ln

City State Zip Code  
 Long Grove IL 60047-5147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, International Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2015

**Transaction ID : 7/16/2015\_00001628**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Moon J Cook**

Mailing Address 1848 Richmond Ln

City State Zip Code  
 Long Grove IL 60047-5147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, International Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2015

**Transaction ID : 7/30/2015\_00001624**

Amount of Each Receipt this Period

50.00

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

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

150.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 71 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Catherine Linn Cook Tillman**

Mailing Address 477 Majestic Ct

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-3228 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Travel, Fleet &amp; Rec Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.57

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00000360

Amount of Each Receipt this Period

76.53

Full Name (Last, First, Middle Initial)

**B. Catherine Linn Cook Tillman**

Mailing Address 477 Majestic Ct

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-3228 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Travel, Fleet &amp; Rec Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.57

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00000366

Amount of Each Receipt this Period

76.53

Full Name (Last, First, Middle Initial)

**C. Catherine Linn Cook Tillman**

Mailing Address 477 Majestic Ct

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-3228 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Travel, Fleet &amp; Rec Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1134.57

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00000365

Amount of Each Receipt this Period

76.53

SUBTOTAL of Receipts This Page (optional)..... ►

229.59

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 PageFOR LINE NUMBER: PAGE 72 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Wendy Lynne Copeland**Mailing Address 916 E Tower Ct  
Unit 3

City Palatine State IL Zip Code 60074-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Clinical Labeling

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.07

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00000491

Amount of Each Receipt this Period

21.15

Full Name (Last, First, Middle Initial)

**B. Wendy Lynne Copeland**Mailing Address 916 E Tower Ct  
Unit 3

City Palatine State IL Zip Code 60074-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Clinical Labeling

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.07

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00000498

Amount of Each Receipt this Period

21.15

Full Name (Last, First, Middle Initial)

**C. Wendy Lynne Copeland**Mailing Address 916 E Tower Ct  
Unit 3

City Palatine State IL Zip Code 60074-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Clinical Labeling

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.07

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00000497

Amount of Each Receipt this Period

21.15

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

63.45

**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 73 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Johanna M Corbin**

Mailing Address 288 Park Ave

City

Grayslake

State

IL

Zip Code

60030-2339

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Legal, Intellectual Property and S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00000277

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Johanna M Corbin**

Mailing Address 288 Park Ave

City

Grayslake

State

IL

Zip Code

60030-2339

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Legal, Intellectual Property and S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00000281

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Johanna M Corbin**

Mailing Address 288 Park Ave

City

Grayslake

State

IL

Zip Code

60030-2339

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Legal, Intellectual Property and S

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00000280

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michelle Cordoba Gunter**

Mailing Address 810 Samuel Dr

City

Whitinsville

State

MA

Zip Code

01588-3323

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Supply Chain Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.06

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00000482**

Amount of Each Receipt this Period

37.24

Full Name (Last, First, Middle Initial)

**B. Michelle Cordoba Gunter**

Mailing Address 810 Samuel Dr

City

Whitinsville

State

MA

Zip Code

01588-3323

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Supply Chain Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.06

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00000489**

Amount of Each Receipt this Period

37.24

Full Name (Last, First, Middle Initial)

**C. Michelle Cordoba Gunter**

Mailing Address 810 Samuel Dr

City

Whitinsville

State

MA

Zip Code

01588-3323

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Supply Chain Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.06

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00000488**

Amount of Each Receipt this Period

37.24

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

111.72

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Paul Jean Cornille**

Mailing Address 228 Cater Ln

City

Libertyville

State

IL

Zip Code

60048-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Commercial Prog Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.44

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00001964**

Amount of Each Receipt this Period

30.48

Full Name (Last, First, Middle Initial)

**B. Paul Jean Cornille**

Mailing Address 228 Cater Ln

City

Libertyville

State

IL

Zip Code

60048-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Commercial Prog Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.44

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00001981**

Amount of Each Receipt this Period

30.48

Full Name (Last, First, Middle Initial)

**C. Paul Jean Cornille**

Mailing Address 228 Cater Ln

City

Libertyville

State

IL

Zip Code

60048-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Commercial Prog Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.44

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00001974**

Amount of Each Receipt this Period

30.48

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

91.44

**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 PageFOR LINE NUMBER: PAGE 76 OF 402  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Joseph N Coughlin**

Mailing Address 1519 Windy Hill Dr

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Northbrook | IL    | 60062-3833 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir FD Aud TX Comp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00001750

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Joseph N Coughlin**

Mailing Address 1519 Windy Hill Dr

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Northbrook | IL    | 60062-3833 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir FD Aud TX Comp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00001766

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Joseph N Coughlin**

Mailing Address 1519 Windy Hill Dr

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Northbrook | IL    | 60062-3833 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir FD Aud TX Comp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00001759

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 77 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Neely A. Coughlin**Mailing Address 140 S Arlington Ave  
Apt 1

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Elmhurst | IL    | 60126-3578 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Finance Compliance Project

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.53

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00002053

Amount of Each Receipt this Period

35.83

Full Name (Last, First, Middle Initial)

**B. Robert M Cusack**

Mailing Address 327 Aspen Pointe Rd

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Vernon Hills | IL    | 60061-2349 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Sales Dermatology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1206.96

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00001284

Amount of Each Receipt this Period

81.72

Full Name (Last, First, Middle Initial)

**C. Robert M Cusack**

Mailing Address 327 Aspen Pointe Rd

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Vernon Hills | IL    | 60061-2349 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Sales Dermatology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1206.96

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00001296

Amount of Each Receipt this Period

81.72

SUBTOTAL of Receipts This Page (optional)..... ►

199.27

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 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Robert M Cusack**

Mailing Address 327 Aspen Pointe Rd

City

Vernon Hills

State

IL

Zip Code

60061-2349

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Sales Dermatology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1206.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00001295

Amount of Each Receipt this Period

81.72

Full Name (Last, First, Middle Initial)

**B. Kimberly A Dahmen**

Mailing Address 8236 25th Ct

City

Kenosha

State

WI

Zip Code

53143-6277

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Manager Strategic Supplier Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00000634

Amount of Each Receipt this Period

28.84

Full Name (Last, First, Middle Initial)

**C. Kimberly A Dahmen**

Mailing Address 8236 25th Ct

City

Kenosha

State

WI

Zip Code

53143-6277

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Manager Strategic Supplier Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00000644

Amount of Each Receipt this Period

28.84

SUBTOTAL of Receipts This Page (optional)..... ►

139.40

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 79 OF 402

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Kimberly A Dahmen**

Mailing Address 8236 25th Ct

City

Kenosha

State

WI

Zip Code

53143-6277

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Manager Strategic Supplier Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.94

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000643

Amount of Each Receipt this Period

28.84

Full Name (Last, First, Middle Initial)

**B. Steven K Davidsen**

Mailing Address 960 Burrige Ct

City

Libertyville

State

IL

Zip Code

60048-2501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Discovery Cancer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.61

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000595

Amount of Each Receipt this Period

71.23

Full Name (Last, First, Middle Initial)

**C. Steven K Davidsen**

Mailing Address 960 Burrige Ct

City

Libertyville

State

IL

Zip Code

60048-2501

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Discovery Cancer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.61

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000604

Amount of Each Receipt this Period

71.23

SUBTOTAL of Receipts This Page (optional)..... ►

171.30

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 PageFOR LINE NUMBER: PAGE 80 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Steven K Davidsen**

Mailing Address 960 Burrigade Ct

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-2501 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Discovery Cancer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.61

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  | / | 30  | / | 2015    |

Transaction ID : 7/30/2015 00000603

Amount of Each Receipt this Period

71.23

Full Name (Last, First, Middle Initial)

**B. Donald J Davidson**

Mailing Address 4835 Kings Way W

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-3257 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Principal Research Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  | / | 02  | / | 2015    |

Transaction ID : 7/2/2015 00000248

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Donald J Davidson**

Mailing Address 4835 Kings Way W

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-3257 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Principal Research Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  | / | 16  | / | 2015    |

Transaction ID : 7/16/2015 00000251

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

111.23

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 81 OF 402

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Donald J Davidson**

Mailing Address 4835 Kings Way W

City

Gurnee

State

IL

Zip Code

60031-3257

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Principal Research Scientist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 30    |   | 2015        |

**Transaction ID : 7/30/2015 00000250**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Sharon Patricia Davis**

Mailing Address 711 E Carpenter Dr

City

Palatine

State

IL

Zip Code

60074-3709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Corporate Financial Reporting

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 02    |   | 2015        |

**Transaction ID : 7/2/2015 00001979**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Sharon Patricia Davis**

Mailing Address 711 E Carpenter Dr

City

Palatine

State

IL

Zip Code

60074-3709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Corporate Financial Reporting

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 16    |   | 2015        |

**Transaction ID : 7/16/2015 00001996**

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 PageFOR LINE NUMBER: PAGE 82 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Sharon Patricia Davis**

Mailing Address 711 E Carpenter Dr

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Palatine | IL    | 60074-3709 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Corporate Financial Reporting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001988

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Brian E Dawson**

Mailing Address 830 Warwick Ln

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Lake Zurich | IL    | 60047-2797 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Marketing Insights

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

922.20

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000683

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

**C. Brian E Dawson**

Mailing Address 830 Warwick Ln

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Lake Zurich | IL    | 60047-2797 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Marketing Insights

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

922.20

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000692

Amount of Each Receipt this Period

62.50

SUBTOTAL of Receipts This Page (optional)..... ►

145.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 83 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Brian E Dawson**

Mailing Address 830 Warwick Ln

City

Lake Zurich

State

IL

Zip Code

60047-2797

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Marketing Insights

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

922.20

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000691

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

**B. Daniel J Dellert**

Mailing Address 509 Sandpiper Dr

City

Lindenhurst

State

IL

Zip Code

60046-7944

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Plant Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000138

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Daniel J Dellert**

Mailing Address 509 Sandpiper Dr

City

Lindenhurst

State

IL

Zip Code

60046-7944

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Plant Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000139

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

112.50

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 84 OF 402

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Daniel J Dellert**

Mailing Address 509 Sandpiper Dr

City

Lindenhurst

State

IL

Zip Code

60046-7944

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Plant Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000139

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Annette Amina Delorenzo**

Mailing Address 1020 E Westleigh Rd

City

Lake Forest

State

IL

Zip Code

60045-3330

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP TA Strategy &amp; Public Policy

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1601.37

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00002012

Amount of Each Receipt this Period

108.93

Full Name (Last, First, Middle Initial)

**C. Annette Amina Delorenzo**

Mailing Address 1020 E Westleigh Rd

City

Lake Forest

State

IL

Zip Code

60045-3330

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP TA Strategy &amp; Public Policy

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1601.37

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00002028

Amount of Each Receipt this Period

108.93

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

242.86

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 85 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Annette Amina Delorenzo**

Mailing Address 1020 E Westleigh Rd

City

Lake Forest

State

IL

Zip Code

60045-3330

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP TA Strategy &amp; Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1601.37

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00002020

Amount of Each Receipt this Period

108.93

Full Name (Last, First, Middle Initial)

**B. Kathy A Desanti**

Mailing Address 8203 Westwood Mews Ct

City

Vienna

State

VA

Zip Code

22182-6015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr District Mgr Specialty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.66

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000893

Amount of Each Receipt this Period

37.48

Full Name (Last, First, Middle Initial)

**C. Kathy A Desanti**

Mailing Address 8203 Westwood Mews Ct

City

Vienna

State

VA

Zip Code

22182-6015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr District Mgr Specialty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.66

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000904

Amount of Each Receipt this Period

37.48

SUBTOTAL of Receipts This Page (optional)..... ►

183.89

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 86 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Kathy A Desanti**

Mailing Address 8203 Westwood Mews Ct

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Vienna | VA    | 22182-6015 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr District Mgr Specialty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.66

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000902

Amount of Each Receipt this Period

37.48

Full Name (Last, First, Middle Initial)

**B. Jacqueline T Dioguardi**

Mailing Address 301 Marseilles St

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Vernon Hills | IL    | 60061-4149 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, IT US Commercial Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.92

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000581

Amount of Each Receipt this Period

74.49

Full Name (Last, First, Middle Initial)

**C. Jacqueline T Dioguardi**

Mailing Address 301 Marseilles St

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Vernon Hills | IL    | 60061-4149 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, IT US Commercial Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.92

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000590

Amount of Each Receipt this Period

74.49

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

186.46

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 87 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Jacqueline T Dioguardi**

Mailing Address 301 Marseilles St

City

Vernon Hills

State

IL

Zip Code

60061-4149

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, IT US Commercial Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

735.92

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000589

Amount of Each Receipt this Period

74.49

Full Name (Last, First, Middle Initial)

**B. Michael E Dixon**

Mailing Address 2453 Kirk Ln NW

City

Kennesaw

State

GA

Zip Code

30152-4705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.79

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001093

Amount of Each Receipt this Period

38.81

Full Name (Last, First, Middle Initial)

**C. Michael E Dixon**

Mailing Address 2453 Kirk Ln NW

City

Kennesaw

State

GA

Zip Code

30152-4705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.79

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001105

Amount of Each Receipt this Period

38.81

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

152.11

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 88 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Michael E Dixon**

Mailing Address 2453 Kirk Ln NW

City

Kennesaw

State

GA

Zip Code

30152-4705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.79

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001103

Amount of Each Receipt this Period

38.81

Full Name (Last, First, Middle Initial)

**B. Thao T Doan**

Mailing Address 523 Sandy Ln

City

Libertyville

State

IL

Zip Code

60048-3553

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Med Dir, Pharmacovigilance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.99

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000384

Amount of Each Receipt this Period

101.63

Full Name (Last, First, Middle Initial)

**C. Thao T Doan**

Mailing Address 523 Sandy Ln

City

Libertyville

State

IL

Zip Code

60048-3553

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Med Dir, Pharmacovigilance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.99

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000390

Amount of Each Receipt this Period

101.63

SUBTOTAL of Receipts This Page (optional)..... ►

242.07

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 89 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Thao T Doan**

Mailing Address 523 Sandy Ln

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-3553 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Med Dir, Pharmacovigilance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.99

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000389

Amount of Each Receipt this Period

101.63

Full Name (Last, First, Middle Initial)

**B. Darryl K Doeblor**

Mailing Address 1010 Mulford St

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Evanston | IL    | 60202-3317 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mktg Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.42

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00001586

Amount of Each Receipt this Period

29.80

Full Name (Last, First, Middle Initial)

**C. Darryl K Doeblor**

Mailing Address 1010 Mulford St

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Evanston | IL    | 60202-3317 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mktg Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.42

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001599

Amount of Each Receipt this Period

29.80

SUBTOTAL of Receipts This Page (optional)..... ►

161.23

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 90 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Darryl K Doebler**

Mailing Address 1010 Mulford St

City

Evanston

State

IL

Zip Code

60202-3317

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mktg Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

441.42

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001595

Amount of Each Receipt this Period

29.80

Full Name (Last, First, Middle Initial)

**B. Rodney M Doersch**

Mailing Address 9411 41st Ave

City

Pleasant Prairie

State

WI

Zip Code

53158-3716

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Program Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000777

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Rodney M Doersch**

Mailing Address 9411 41st Ave

City

Pleasant Prairie

State

WI

Zip Code

53158-3716

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Program Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000788

Amount of Each Receipt this Period

20.00

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

69.80

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 91 OF 402

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Rodney M Doersch**

Mailing Address 9411 41st Ave

City

Pleasant Prairie

State

WI

Zip Code

53158-3716

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Program Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00000787**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. David Donabedian**

Mailing Address 270 Freeman Pkwy

City

Providence

State

RI

Zip Code

02906-5743

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Ventures &amp; Early Stage Collaborati

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1055.52

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00002000**

Amount of Each Receipt this Period

71.06

Full Name (Last, First, Middle Initial)

**C. David Donabedian**

Mailing Address 270 Freeman Pkwy

City

Providence

State

RI

Zip Code

02906-5743

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Ventures &amp; Early Stage Collaborati

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1055.52

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00002016**

Amount of Each Receipt this Period

71.06

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

162.12

**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: PAGE 92 OF 402

(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. David Donabedian**

Mailing Address 270 Freeman Pkwy

City

Providence

State

RI

Zip Code

02906-5743

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Ventures & Early Stage Collaborati

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1055.52

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00002008

Amount of Each Receipt this Period

71.06

Full Name (Last, First, Middle Initial)

## **B. Michael P Douma**

Mailing Address 972 Danielson Ct

City

Gurnee

State

IL

Zip Code

60031-4108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Supply Chain

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1613.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00000220

Amount of Each Receipt this Period

110.05

Full Name (Last, First, Middle Initial)

## **C. Michael P Douma**

Mailing Address 972 Danielson Ct

City

Gurnee

State

IL

Zip Code

60031-4108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Supply Chain

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1613.37

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00000222

Amount of Each Receipt this Period

110.05

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

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

291.16

# 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 402

☒ 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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

### A. Michael P Douma

Mailing Address 972 Danielson Ct

City

Gurnee

State

IL

Zip Code

60031-4108

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Supply Chain

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1613.37

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000221

Amount of Each Receipt this Period

110.05

Full Name (Last, First, Middle Initial)

### B. Brian Keith Dragus

Mailing Address 1746 N 77th Ave

City

Elmwood Park

State

IL

Zip Code

60707-4107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Manager, Systems Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.53

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00001892

Amount of Each Receipt this Period

25.49

Full Name (Last, First, Middle Initial)

### C. Brian Keith Dragus

Mailing Address 1746 N 77th Ave

City

Elmwood Park

State

IL

Zip Code

60707-4107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Manager, Systems Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.53

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00001908

Amount of Each Receipt this Period

23.02

SUBTOTAL of Receipts This Page (optional)..... ►

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

158.56

# **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 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Brian Keith Dragus**

Mailing Address 1746 N 77th Ave

City

Elmwood Park

State

IL

Zip Code

60707-4107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Manager, Systems Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.53

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00001901

Amount of Each Receipt this Period

23.02

Full Name (Last, First, Middle Initial)

**B. Kathy A Drennen**

Mailing Address PO Box 488

City

Wadsworth

State

IL

Zip Code

60083-0488

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Record to Rept Bus Supp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.57

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000308

Amount of Each Receipt this Period

41.35

Full Name (Last, First, Middle Initial)

**C. Kathy A Drennen**

Mailing Address PO Box 488

City

Wadsworth

State

IL

Zip Code

60083-0488

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Record to Rept Bus Supp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

609.57

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000312

Amount of Each Receipt this Period

41.35

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

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

105.72

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kathy A Drennen**

Mailing Address PO Box 488

City

Wadsworth

State

IL

Zip Code

60083-0488

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Record to Rept Bus Supp

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

609.57

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00000311**

Amount of Each Receipt this Period

41.35

Full Name (Last, First, Middle Initial)

**B. Judith L Dudley**

Mailing Address 3 Eliot Ln

City

Wilbraham

State

MA

Zip Code

01095-1814

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Q Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

444.63

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00000449**

Amount of Each Receipt this Period

30.07

Full Name (Last, First, Middle Initial)

**c. Judith L Dudley**

Mailing Address 3 Eliot Ln

City

Wilbraham

State

MA

Zip Code

01095-1814

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Q Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

444.63

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00000455**

Amount of Each Receipt this Period

30.07

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

101.49

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 96 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Judith L Dudley**

Mailing Address 3 Eliot Ln

City

Wilbraham

State

MA

Zip Code

01095-1814

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Q Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.63

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000454

Amount of Each Receipt this Period

30.07

Full Name (Last, First, Middle Initial)

**B. John J Duffey III**

Mailing Address 1603 Mulberry Dr

City

Libertyville

State

IL

Zip Code

60048-5303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US DERMATOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

851.19

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000250

Amount of Each Receipt this Period

110.17

Full Name (Last, First, Middle Initial)

**c. John J Duffey III**

Mailing Address 1603 Mulberry Dr

City

Libertyville

State

IL

Zip Code

60048-5303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US DERMATOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

851.19

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000253

Amount of Each Receipt this Period

110.17

SUBTOTAL of Receipts This Page (optional)..... ►

250.41

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 97 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. John J Duffey III**

Mailing Address 1603 Mulberry Dr

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-5303 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US DERMATOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

851.19

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000252

Amount of Each Receipt this Period

110.17

Full Name (Last, First, Middle Initial)

**B. Larry L Duncan**

Mailing Address 37100 N Bonnie Brae Rd

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Lake Villa | IL    | 60046-6771 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Commercial Str

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

719.88

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000922

Amount of Each Receipt this Period

48.52

Full Name (Last, First, Middle Initial)

**C. Larry L Duncan**

Mailing Address 37100 N Bonnie Brae Rd

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Lake Villa | IL    | 60046-6771 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Commercial Str

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

719.88

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000933

Amount of Each Receipt this Period

48.52

SUBTOTAL of Receipts This Page (optional)..... ►

207.21

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 98 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Larry L Duncan**

Mailing Address 37100 N Bonnie Brae Rd

City

Lake Villa

State

IL

Zip Code

60046-6771

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Commercial Str

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

719.88

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000931

Amount of Each Receipt this Period

48.52

Full Name (Last, First, Middle Initial)

**B. Amarendra Duvvur**

Mailing Address 873 Spruce St

City

Winnetka

State

IL

Zip Code

60093-2218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00001975

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**C. Amarendra Duvvur**

Mailing Address 873 Spruce St

City

Winnetka

State

IL

Zip Code

60093-2218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Treasurer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00001992

Amount of Each Receipt this Period

85.00

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

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

218.52

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 99 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Amarendra Duvvur**

Mailing Address 873 Spruce St

City

Winnetka

State

IL

Zip Code

60093-2218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Treasurer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

960.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00001984**

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**B. Paul Clifford Ehrlich**Mailing Address 1310 12th St NW  
Apt 1

City

Washington

State

DC

Zip Code

20005-4442

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Government Affairs Operation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

874.53

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00001959**

Amount of Each Receipt this Period

58.99

Full Name (Last, First, Middle Initial)

**C. Paul Clifford Ehrlich**Mailing Address 1310 12th St NW  
Apt 1

City

Washington

State

DC

Zip Code

20005-4442

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Government Affairs Operation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

874.53

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00001976**

Amount of Each Receipt this Period

58.99

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

202.98

**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 PageFOR LINE NUMBER: PAGE 100 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Paul Clifford Ehrlich**Mailing Address 1310 12th St NW  
Apt 1

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Washington | DC    | 20005-4442 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Government Affairs Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

874.53

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001969

Amount of Each Receipt this Period

58.99

Full Name (Last, First, Middle Initial)

**B. Ann Katherine Eldred**

Mailing Address 240 E Sheridan Rd

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Lake Bluff | IL    | 60044-2732 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Devlp Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1263.90

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00001971

Amount of Each Receipt this Period

84.19

Full Name (Last, First, Middle Initial)

**C. Ann Katherine Eldred**

Mailing Address 240 E Sheridan Rd

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Lake Bluff | IL    | 60044-2732 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Devlp Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1263.90

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001988

Amount of Each Receipt this Period

84.19

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

227.37

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 101 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Ann Katherine Eldred**

Mailing Address 240 E Sheridan Rd

City

Lake Bluff

State

IL

Zip Code

60044-2732

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Devlp Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1263.90

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001980

Amount of Each Receipt this Period

101.86

Full Name (Last, First, Middle Initial)

**B. James B Ellington**

Mailing Address 1411 Churchill Ln

City

Grayslake

State

IL

Zip Code

60030-3754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. 3rd Party Manuf. Acct. Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.46

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000033

Amount of Each Receipt this Period

29.62

Full Name (Last, First, Middle Initial)

**C. James B Ellington**

Mailing Address 1411 Churchill Ln

City

Grayslake

State

IL

Zip Code

60030-3754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. 3rd Party Manuf. Acct. Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.46

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000033

Amount of Each Receipt this Period

29.62

SUBTOTAL of Receipts This Page (optional)..... ►

161.10

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 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. James B Ellington**

Mailing Address 1411 Churchill Ln

City

Grayslake

State

IL

Zip Code

60030-3754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. 3rd Party Manuf. Acct. Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

437.46

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000033

Amount of Each Receipt this Period

29.62

Full Name (Last, First, Middle Initial)

**B. James Embrescia**

Mailing Address 811 Chicago Ave  
Apt 808

City

Evanston

State

IL

Zip Code

60202-2398

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Pharmacovigilance & Patient Safety

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000719

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. James Embrescia**

Mailing Address 811 Chicago Ave  
Apt 808

City

Evanston

State

IL

Zip Code

60202-2398

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Pharmacovigilance & Patient Safety

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000729

Amount of Each Receipt this Period

20.00

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

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

69.62

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 103 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. James Embrescia**Mailing Address 811 Chicago Ave  
Apt 808

City Evanston State IL Zip Code 60202-2398

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Pharmacovigilance &amp; Patient Safety

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000728

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Ramon E Espailat**Mailing Address 1630 Chicago Ave  
Apt 2003

City Evanston State IL Zip Code 60201-6024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Associate Medical/Scientific Director,

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.26

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00001520

Amount of Each Receipt this Period

37.22

Full Name (Last, First, Middle Initial)

**C. Ramon E Espailat**Mailing Address 1630 Chicago Ave  
Apt 2003

City Evanston State IL Zip Code 60201-6024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Associate Medical/Scientific Director,

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.26

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00001529

Amount of Each Receipt this Period

37.22

SUBTOTAL of Receipts This Page (optional)..... ►

94.44

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 104 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Ramon E Espallat**Mailing Address 1630 Chicago Ave  
Apt 2003

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Evanston | IL    | 60201-6024 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Associate Medical/Scientific Director,

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.26

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001526

Amount of Each Receipt this Period

37.22

Full Name (Last, First, Middle Initial)

**B. Elizabeth J Fabian**

Mailing Address 1720 Eric Ln

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-4405 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Operations I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.26

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000754

Amount of Each Receipt this Period

62.42

Full Name (Last, First, Middle Initial)

**C. Hugh D Falls**

Mailing Address 359 E Wisconsin Ave

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Lake Forest | IL    | 60045-1467 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Scientist II Cell/Mol Bio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.73

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000451

Amount of Each Receipt this Period

17.49

SUBTOTAL of Receipts This Page (optional)..... ►

117.13

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 105 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Hugh D Falls**

Mailing Address 359 E Wisconsin Ave

City

Lake Forest

State

IL

Zip Code

60045-1467

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Scientist II Cell/Mol Bio

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00000457

Amount of Each Receipt this Period

17.49

Full Name (Last, First, Middle Initial)

**B. Hugh D Falls**

Mailing Address 359 E Wisconsin Ave

City

Lake Forest

State

IL

Zip Code

60045-1467

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Scientist II Cell/Mol Bio

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.73

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000456

Amount of Each Receipt this Period

17.49

Full Name (Last, First, Middle Initial)

**C. Liam C Feely**

Mailing Address 1571 Millstone Ln

City

Gurnee

State

IL

Zip Code

60031-5684

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Manufacturing Science And Technolo

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

858.84

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00000632

Amount of Each Receipt this Period

60.00

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

94.98

**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 106 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

A. Liam C Feely

Mailing Address 1571 Millstone Ln

City State Zip Code  
 Gurnee IL 60031-5684

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Manufacturing Science And Technolo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.84

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 16 / 2015

Transaction ID : 7/16/2015 00000642

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

B. Liam C Feely

Mailing Address 1571 Millstone Ln

City State Zip Code  
 Gurnee IL 60031-5684

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Manufacturing Science And Technolo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

858.84

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 30 / 2015

Transaction ID : 7/30/2015 00000641

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. Catherine D Ferguson

Mailing Address 6552 Jay Miller Dr

City State Zip Code  
 Falls Church VA 22041-1137

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Fed Govt Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

787.59

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2015

Transaction ID : 7/2/2015 00001752

Amount of Each Receipt this Period

54.43

SUBTOTAL of Receipts This Page (optional)..... ►

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

174.43

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 107 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Catherine D Ferguson**

Mailing Address 6552 Jay Miller Dr

City

Falls Church

State

VA

Zip Code

22041-1137

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Fed Govt Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

787.59

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00001768**

Amount of Each Receipt this Period

54.43

Full Name (Last, First, Middle Initial)

**B. Catherine D Ferguson**

Mailing Address 6552 Jay Miller Dr

City

Falls Church

State

VA

Zip Code

22041-1137

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Fed Govt Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

787.59

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00001761**

Amount of Each Receipt this Period

54.43

Full Name (Last, First, Middle Initial)

**C. Sandra Fielder**

Mailing Address 36685 N Devon Ct

City

Wadsworth

State

IL

Zip Code

60083-9576

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Medical Safety Ops

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

674.43

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00002082**

Amount of Each Receipt this Period

45.45

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

154.31

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 108 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Sandra Fielder**

Mailing Address 36685 N Devon Ct

City

Wadsworth

State

IL

Zip Code

60083-9576

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Medical Safety Ops

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

674.43

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00002099

Amount of Each Receipt this Period

45.45

Full Name (Last, First, Middle Initial)

**B. Sandra Fielder**

Mailing Address 36685 N Devon Ct

City

Wadsworth

State

IL

Zip Code

60083-9576

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Medical Safety Ops

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

674.43

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00002090

Amount of Each Receipt this Period

45.45

Full Name (Last, First, Middle Initial)

**C. Thomas T Fitzsimon**

Mailing Address 9130 Nolan St

Apt 163

City

Elk Grove

State

CA

Zip Code

95758-7530

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Acute Care Pharma Specialist III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

267.36

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001096

Amount of Each Receipt this Period

18.10

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

109.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 109 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Thomas T Fitzsimon**Mailing Address 9130 Nolan St  
Apt 163

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Elk Grove | CA    | 95758-7530 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Acute Care Pharma Specialist III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.36

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001108

Amount of Each Receipt this Period

18.10

Full Name (Last, First, Middle Initial)

**B. Thomas T Fitzsimon**Mailing Address 9130 Nolan St  
Apt 163

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Elk Grove | CA    | 95758-7530 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Acute Care Pharma Specialist III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.36

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001106

Amount of Each Receipt this Period

18.10

Full Name (Last, First, Middle Initial)

**C. Riklef V Flor**

Mailing Address 635 N Silver Leaf Ln

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Round Lake | IL    | 60073-5266 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir App Tech Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

567.99

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000764

Amount of Each Receipt this Period

38.31

SUBTOTAL of Receipts This Page (optional)..... ►

74.51

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 110 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Riklef V Flor**

Mailing Address 635 N Silver Leaf Ln

City

Round Lake

State

IL

Zip Code

60073-5266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir App Tech Svcs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

567.99

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00000775**

Amount of Each Receipt this Period

38.31

Full Name (Last, First, Middle Initial)

**B. Riklef V Flor**

Mailing Address 635 N Silver Leaf Ln

City

Round Lake

State

IL

Zip Code

60073-5266

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir App Tech Svcs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

567.99

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00000774**

Amount of Each Receipt this Period

38.31

Full Name (Last, First, Middle Initial)

**C. William Flynn**

Mailing Address 1 Stirrup Trl

City

Pawling

State

NY

Zip Code

12564-2221

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr District Mgr Specialty

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00001329**

Amount of Each Receipt this Period

25.00

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

101.62

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 111 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. William Flynn**

Mailing Address 1 Stirrup Trl

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Pawling | NY    | 12564-2221 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr District Mgr Specialty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  | / | 16  | / | 2015    |

Transaction ID : 7/16/2015 00001340

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. William Flynn**

Mailing Address 1 Stirrup Trl

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Pawling | NY    | 12564-2221 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr District Mgr Specialty

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  | / | 30  | / | 2015    |

Transaction ID : 7/30/2015 00001339

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. George Foley**

Mailing Address 1978 Trevino Ter

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Vernon Hills | IL    | 60061-4537 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Pcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  | / | 02  | / | 2015    |

Transaction ID : 7/2/2015 00001737

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 112 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. George Foley**

Mailing Address 1978 Trevino Ter

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Vernon Hills | IL    | 60061-4537 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Pcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001752

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. George Foley**

Mailing Address 1978 Trevino Ter

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Vernon Hills | IL    | 60061-4537 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Pcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001745

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. John Phillip Ford**Mailing Address 1300 Crystal Dr  
Apt 406

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Arlington | VA    | 22202-3249 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Federal Government Affai

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.15

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00001756

Amount of Each Receipt this Period

57.57

SUBTOTAL of Receipts This Page (optional)..... ►

97.57

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 113 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. John Phillip Ford**

Mailing Address 1300 Crystal Dr  
Apt 406

City State Zip Code  
Arlington VA 22202-3249

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Federal Government Affai

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.15

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00001773

Amount of Each Receipt this Period

57.57

Full Name (Last, First, Middle Initial)

**B. John Phillip Ford**

Mailing Address 1300 Crystal Dr  
Apt 406

City State Zip Code  
Arlington VA 22202-3249

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Federal Government Affai

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.15

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00001766

Amount of Each Receipt this Period

57.57

Full Name (Last, First, Middle Initial)

**C. Joseph Foster**

Mailing Address 3046 Hartzell St

City State Zip Code  
Evanston IL 60201-1124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr App Technlgies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.49

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00001604

Amount of Each Receipt this Period

31.47

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

146.61

**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: PAGE 114 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Joseph Foster**

Mailing Address 3046 Hartzell St

City

Evanston

State

IL

Zip Code

60201-1124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr App Technlgies

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

467.49

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00001617**

Amount of Each Receipt this Period

31.47

Full Name (Last, First, Middle Initial)

**B. Joseph Foster**

Mailing Address 3046 Hartzell St

City

Evanston

State

IL

Zip Code

60201-1124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr App Technlgies

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

467.49

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00001613**

Amount of Each Receipt this Period

31.47

Full Name (Last, First, Middle Initial)

**C. Marilyn Kay Frontz**

Mailing Address 1202 42nd Ave

City

Kenosha

State

WI

Zip Code

53144-1216

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP QA

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

2143.86

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00000646**

Amount of Each Receipt this Period

144.62

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

207.56

**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 115 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Marilyn Kay Frontz**

Mailing Address 1202 42nd Ave

City

Kenosha

State

WI

Zip Code

53144-1216

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP QA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2143.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015 00000655**

Amount of Each Receipt this Period

144.62

Full Name (Last, First, Middle Initial)

## **B. Marilyn Kay Frontz**

Mailing Address 1202 42nd Ave

City

Kenosha

State

WI

Zip Code

53144-1216

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP QA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2143.86

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015 00000654**

Amount of Each Receipt this Period

144.62

Full Name (Last, First, Middle Initial)

## **C. Robert Fuest**

Mailing Address 1 Juniper Ln

City

Greenville

State

RI

Zip Code

02828-1307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

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  
07 / 02 / 2015

**Transaction ID : 7/2/2015 00001871**

Amount of Each Receipt this Period

20.00

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

309.24

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 116 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Robert Fuest**

Mailing Address 1 Juniper Ln

City

Greenville

State

RI

Zip Code

02828-1307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001887

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Robert Fuest**

Mailing Address 1 Juniper Ln

City

Greenville

State

RI

Zip Code

02828-1307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001880

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Loretta A Gallenberg**

Mailing Address 30708 Belaire Dr

City

Burlington

State

WI

Zip Code

53105-9779

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Tox &amp; Sfty Phm

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000721

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

65.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 117 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Loretta A Gallenberg**

Mailing Address 30708 Belaire Dr

City

Burlington

State

WI

Zip Code

53105-9779

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Tox &amp; Sfty Phm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000731

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Loretta A Gallenberg**

Mailing Address 30708 Belaire Dr

City

Burlington

State

WI

Zip Code

53105-9779

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Tox &amp; Sfty Phm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000730

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Russell Garich Jr**

Mailing Address 831 Charlton Rd

City

Lake Villa

State

IL

Zip Code

60046-5227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Distribution &amp; Logistics Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.84

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000298

Amount of Each Receipt this Period

45.73

SUBTOTAL of Receipts This Page (optional)..... ►

95.73

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 118 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Russell Garich Jr**

Mailing Address 831 Charlton Rd

City

Lake Villa

State

IL

Zip Code

60046-5227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Distribution &amp; Logistics Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.84

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000302

Amount of Each Receipt this Period

45.73

Full Name (Last, First, Middle Initial)

**B. Russell Garich Jr**

Mailing Address 831 Charlton Rd

City

Lake Villa

State

IL

Zip Code

60046-5227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Distribution &amp; Logistics Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.84

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000301

Amount of Each Receipt this Period

45.73

Full Name (Last, First, Middle Initial)

**C. Julie L Gausepohl**

Mailing Address 1695 Natures Way

City

Lindenhurst

State

IL

Zip Code

60046-1713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Controller Ppg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1337.57

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000086

Amount of Each Receipt this Period

104.75

SUBTOTAL of Receipts This Page (optional)..... ►

196.21

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 119 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Michael Joseph Gautsch**

Mailing Address 689 Valley Park Dr

City

Libertyville

State

IL

Zip Code

60048-3421

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.18

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00001123

Amount of Each Receipt this Period

56.78

Full Name (Last, First, Middle Initial)

**B. Michael Joseph Gautsch**

Mailing Address 689 Valley Park Dr

City

Libertyville

State

IL

Zip Code

60048-3421

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.18

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00001135

Amount of Each Receipt this Period

56.78

Full Name (Last, First, Middle Initial)

**C. Michael Joseph Gautsch**

Mailing Address 689 Valley Park Dr

City

Libertyville

State

IL

Zip Code

60048-3421

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.18

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00001133

Amount of Each Receipt this Period

56.78

SUBTOTAL of Receipts This Page (optional)..... ►

170.34

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 PageFOR LINE NUMBER: PAGE 120 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Timothy J Gerrits**

Mailing Address 25206 W Sunset Ln

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Lake Villa | IL    | 60046-8130 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Director, Talent Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

824.67

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

**Transaction ID : 7/2/2015\_00001873**

Amount of Each Receipt this Period

55.73

Full Name (Last, First, Middle Initial)

**B. Timothy J Gerrits**

Mailing Address 25206 W Sunset Ln

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Lake Villa | IL    | 60046-8130 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Director, Talent Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

824.67

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

**Transaction ID : 7/16/2015\_00001889**

Amount of Each Receipt this Period

55.73

Full Name (Last, First, Middle Initial)

**C. Timothy J Gerrits**

Mailing Address 25206 W Sunset Ln

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Lake Villa | IL    | 60046-8130 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Director, Talent Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

824.67

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

**Transaction ID : 7/30/2015\_00001882**

Amount of Each Receipt this Period

55.73

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

167.19

**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 121 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Carol Abigail Thomas Gillis**

Mailing Address 4222 NW 73rd Ter

City

Gainesville

State

FL

Zip Code

32606-3909

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

MSL Group Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.19

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00000993

Amount of Each Receipt this Period

65.45

Full Name (Last, First, Middle Initial)

**B. Carol Abigail Thomas Gillis**

Mailing Address 4222 NW 73rd Ter

City

Gainesville

State

FL

Zip Code

32606-3909

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

MSL Group Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.19

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00001004

Amount of Each Receipt this Period

73.29

Full Name (Last, First, Middle Initial)

**C. Carol Abigail Thomas Gillis**

Mailing Address 4222 NW 73rd Ter

City

Gainesville

State

FL

Zip Code

32606-3909

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

MSL Group Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.19

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00001002

Amount of Each Receipt this Period

69.37

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

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

208.11

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 122 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Ursula K Gilmore**

Mailing Address 622 Roosevelt Dr

City

Libertyville

State

IL

Zip Code

60048-3122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Tech App

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

624.18

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000703

Amount of Each Receipt this Period

42.10

Full Name (Last, First, Middle Initial)

**B. Ursula K Gilmore**

Mailing Address 622 Roosevelt Dr

City

Libertyville

State

IL

Zip Code

60048-3122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Tech App

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

624.18

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000713

Amount of Each Receipt this Period

42.10

Full Name (Last, First, Middle Initial)

**C. Ursula K Gilmore**

Mailing Address 622 Roosevelt Dr

City

Libertyville

State

IL

Zip Code

60048-3122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Tech App

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

624.18

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000712

Amount of Each Receipt this Period

42.10

SUBTOTAL of Receipts This Page (optional)..... ►

126.30

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 123 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Elina Glusker**

Mailing Address 645 Hyacinth Pl

City

Highland Park

State

IL

Zip Code

60035-1169

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Tpm Account Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

758.76

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 | 2 |   |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00000373**

Amount of Each Receipt this Period

51.08

Full Name (Last, First, Middle Initial)

**B. Elina Glusker**

Mailing Address 645 Hyacinth Pl

City

Highland Park

State

IL

Zip Code

60035-1169

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Tpm Account Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

758.76

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00000379**

Amount of Each Receipt this Period

51.08

Full Name (Last, First, Middle Initial)

**C. Elina Glusker**

Mailing Address 645 Hyacinth Pl

City

Highland Park

State

IL

Zip Code

60035-1169

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Tpm Account Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

758.76

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00000378**

Amount of Each Receipt this Period

51.08

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

153.24

**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 PageFOR LINE NUMBER: PAGE 124 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael Goebel**

Mailing Address 2503A Riverton Rd

City

Cinnaminson

State

NJ

Zip Code

08077-3722

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

District Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

354.45

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00001874**

Amount of Each Receipt this Period

23.63

Full Name (Last, First, Middle Initial)

**B. Michael Goebel**

Mailing Address 2503A Riverton Rd

City

Cinnaminson

State

NJ

Zip Code

08077-3722

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

District Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

354.45

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00001890**

Amount of Each Receipt this Period

23.63

Full Name (Last, First, Middle Initial)

**C. Michael Goebel**

Mailing Address 2503A Riverton Rd

City

Cinnaminson

State

NJ

Zip Code

08077-3722

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

District Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

354.45

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00001883**

Amount of Each Receipt this Period

23.63

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

70.89

**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 125 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Mary K Goldman**

Mailing Address 18899 W Wooddale Trl

City

Lake Villa

State

IL

Zip Code

60046-6754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Business HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.64

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00000495

Amount of Each Receipt this Period

64.44

Full Name (Last, First, Middle Initial)

**B. Mary K Goldman**

Mailing Address 18899 W Wooddale Trl

City

Lake Villa

State

IL

Zip Code

60046-6754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Business HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.64

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00000502

Amount of Each Receipt this Period

64.44

Full Name (Last, First, Middle Initial)

**C. Mary K Goldman**

Mailing Address 18899 W Wooddale Trl

City

Lake Villa

State

IL

Zip Code

60046-6754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Business HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.64

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00000501

Amount of Each Receipt this Period

64.44

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

193.32

**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 PageFOR LINE NUMBER: PAGE 126 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Francine M Gordon**

Mailing Address 105 N Hamlin Ave

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Park Ridge | IL    | 60068-2919 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Licensing &amp; Acquisitions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00000333

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Francine M Gordon**

Mailing Address 105 N Hamlin Ave

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Park Ridge | IL    | 60068-2919 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Licensing &amp; Acquisitions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00000339

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Francine M Gordon**

Mailing Address 105 N Hamlin Ave

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Park Ridge | IL    | 60068-2919 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Licensing &amp; Acquisitions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00000338

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 PageFOR LINE NUMBER: PAGE 127 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Gary Gordon**

Mailing Address 3282 University Ave

City

Highland Park

State

IL

Zip Code

60035-1147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Oncology Development

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000747

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Gary Gordon**

Mailing Address 3282 University Ave

City

Highland Park

State

IL

Zip Code

60035-1147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Oncology Development

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000757

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Gary Gordon**

Mailing Address 3282 University Ave

City

Highland Park

State

IL

Zip Code

60035-1147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Oncology Development

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000756

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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 PageFOR LINE NUMBER: PAGE 128 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael R Gordon**

Mailing Address 38 Ledgecrest Dr

City

Worcester

State

MA

Zip Code

01603-1250

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Production Supv

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.90

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00000644**

Amount of Each Receipt this Period

17.63

Full Name (Last, First, Middle Initial)

**B. Michael R Gordon**

Mailing Address 38 Ledgecrest Dr

City

Worcester

State

MA

Zip Code

01603-1250

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Production Supv

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.90

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00000653**

Amount of Each Receipt this Period

17.63

Full Name (Last, First, Middle Initial)

**C. Michael R Gordon**

Mailing Address 38 Ledgecrest Dr

City

Worcester

State

MA

Zip Code

01603-1250

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Production Supv

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.90

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00000652**

Amount of Each Receipt this Period

17.63

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

52.89

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 129 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jonathon R Green**

Mailing Address 1859 Eldorado Dr

City

Geneva

State

IL

Zip Code

60134-4334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Scientist II Pharmaclg

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.73

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00000816**

Amount of Each Receipt this Period

18.67

Full Name (Last, First, Middle Initial)

**B. Jonathon R Green**

Mailing Address 1859 Eldorado Dr

City

Geneva

State

IL

Zip Code

60134-4334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Scientist II Pharmaclg

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.73

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00000827**

Amount of Each Receipt this Period

18.67

Full Name (Last, First, Middle Initial)

**C. Jonathon R Green**

Mailing Address 1859 Eldorado Dr

City

Geneva

State

IL

Zip Code

60134-4334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Scientist II Pharmaclg

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.73

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00000826**

Amount of Each Receipt this Period

18.67

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

56.01

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 130 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Nancy W Greenfield**Mailing Address 4146 Pirates Bch  
3511 Petite Circle

City Galveston State TX Zip Code 77554-8042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Ambassador Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00000840

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Nancy W Greenfield**Mailing Address 4146 Pirates Bch  
3511 Petite Circle

City Galveston State TX Zip Code 77554-8042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Ambassador Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00000851

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Nancy W Greenfield**Mailing Address 4146 Pirates Bch  
3511 Petite Circle

City Galveston State TX Zip Code 77554-8042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Ambassador Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00000850

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 131 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Debbie S Griggs-Smith**

Mailing Address 321 Bryant Ave

City

Alameda

State

CA

Zip Code

94501-3531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Acct Exc II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00001878

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Debbie S Griggs-Smith**

Mailing Address 321 Bryant Ave

City

Alameda

State

CA

Zip Code

94501-3531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Acct Exc II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00001894

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Debbie S Griggs-Smith**

Mailing Address 321 Bryant Ave

City

Alameda

State

CA

Zip Code

94501-3531

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Acct Exc II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00001887

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 132 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Robert S Grundman**

Mailing Address 20091 Erickson Path

City

Farmington

State

MN

Zip Code

55024-2024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001615

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Robert S Grundman**

Mailing Address 20091 Erickson Path

City

Farmington

State

MN

Zip Code

55024-2024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001611

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Mark A Grupka**

Mailing Address 1414 Benton Rd

City

Lake Villa

State

IL

Zip Code

60046-5754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Principal Engr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.41

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000803

Amount of Each Receipt this Period

23.77

SUBTOTAL of Receipts This Page (optional)..... ►

53.77

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 133 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Mark A Grupka**

Mailing Address 1414 Benton Rd

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Lake Villa | IL    | 60046-5754 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Principal Engr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.41

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000814

Amount of Each Receipt this Period

23.77

Full Name (Last, First, Middle Initial)

**B. Mark A Grupka**

Mailing Address 1414 Benton Rd

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Lake Villa | IL    | 60046-5754 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Principal Engr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.41

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000813

Amount of Each Receipt this Period

23.77

Full Name (Last, First, Middle Initial)

**C. Jeffrey N Haas**

Mailing Address 526 Lange Ct

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-1819 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US SPECIALTY &amp; MGD HLTH CARE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1806.63

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000157

Amount of Each Receipt this Period

135.35

SUBTOTAL of Receipts This Page (optional)..... ►

182.89

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 134 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Jeffrey N Haas**

Mailing Address 526 Lange Ct

City

Libertyville

State

IL

Zip Code

60048-1819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US SPECIALTY &amp; MGD HLTH CARE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1806.63

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000159

Amount of Each Receipt this Period

135.35

Full Name (Last, First, Middle Initial)

**B. Jeffrey N Haas**

Mailing Address 526 Lange Ct

City

Libertyville

State

IL

Zip Code

60048-1819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US SPECIALTY &amp; MGD HLTH CARE

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1806.63

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000159

Amount of Each Receipt this Period

135.35

Full Name (Last, First, Middle Initial)

**C. Tracie A Haas**

Mailing Address 526 Lange Ct

City

Libertyville

State

IL

Zip Code

60048-1819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Corporate Responsibility &amp; Communi

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2031.48

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000614

Amount of Each Receipt this Period

138.46

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

409.16

**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 135 OF 402

(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Tracie A Haas**

Mailing Address 526 Lange Ct

City State Zip Code  
Libertyville IL 60048-1819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Corporate Responsibility & Communi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.48

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015 00000624**

Amount of Each Receipt this Period

138.46

Full Name (Last, First, Middle Initial)

## **B. Tracie A Haas**

Mailing Address 526 Lange Ct

City State Zip Code  
Libertyville IL 60048-1819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Corporate Responsibility & Communi

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2031.48

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015 00000623**

Amount of Each Receipt this Period

138.46

Full Name (Last, First, Middle Initial)

## **C. Patricia A Hafferkamp**

Mailing Address 3429 99th St

City State Zip Code  
Pleasant Prairie WI 53158-4012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr Bus HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015 00000514**

Amount of Each Receipt this Period

20.00

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

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

296.92

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 136 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Patricia A Hafferkamp**

Mailing Address 3429 99th St

City

Pleasant Prairie

State

WI

Zip Code

53158-4012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr Bus HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000521

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Patricia A Hafferkamp**

Mailing Address 3429 99th St

City

Pleasant Prairie

State

WI

Zip Code

53158-4012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr Bus HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000520

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. George M Haig**

Mailing Address 7015 Lauren Ct

City

Gurnee

State

IL

Zip Code

60031-4491

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Dir I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001641

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

55.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 137 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. George M Haig**

Mailing Address 7015 Lauren Ct

City

Gurnee

State

IL

Zip Code

60031-4491

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Dir I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001637

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Karen L Hale**Mailing Address 122 S Aberdeen St  
Unit PH

City

Chicago

State

IL

Zip Code

60607-1503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Chief Ethics And Compliance Office

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1321.41

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000664

Amount of Each Receipt this Period

89.13

Full Name (Last, First, Middle Initial)

**C. Karen L Hale**Mailing Address 122 S Aberdeen St  
Unit PH

City

Chicago

State

IL

Zip Code

60607-1503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Chief Ethics And Compliance Office

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1321.41

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000673

Amount of Each Receipt this Period

89.13

SUBTOTAL of Receipts This Page (optional)..... ►

193.26

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 PageFOR LINE NUMBER: PAGE 138 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Karen L Hale**

Mailing Address 122 S Aberdeen St

Unit PH

City

Chicago

State

IL

Zip Code

60607-1503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Chief Ethics And Compliance Office

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1321.41

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000672

Amount of Each Receipt this Period

89.13

Full Name (Last, First, Middle Initial)

**B. Jane Castelli Haley**

Mailing Address 900 N Lake Shore Dr

Apt 2501

City

Chicago

State

IL

Zip Code

60611-1579

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Health Economics &amp; Outco

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

714.60

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001993

Amount of Each Receipt this Period

48.20

Full Name (Last, First, Middle Initial)

**C. Jane Castelli Haley**

Mailing Address 900 N Lake Shore Dr

Apt 2501

City

Chicago

State

IL

Zip Code

60611-1579

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Health Economics &amp; Outco

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

714.60

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00002009

Amount of Each Receipt this Period

48.20

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

185.53

**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 139 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jane Castelli Haley**

Mailing Address 900 N Lake Shore Dr  
Apt 2501

City State Zip Code  
Chicago IL 60611-1579

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Health Economics & Outco

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

714.60

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015 00002001**

Amount of Each Receipt this Period

48.20

Full Name (Last, First, Middle Initial)

**B. Jody N Hammond**

Mailing Address 31310 60th St

City State Zip Code  
Salem WI 53168-9124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir GPRD Eng & Scien Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1055.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015 00000330**

Amount of Each Receipt this Period

76.32

Full Name (Last, First, Middle Initial)

**C. Jody N Hammond**

Mailing Address 31310 60th St

City State Zip Code  
Salem WI 53168-9124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir GPRD Eng & Scien Serv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1055.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015 00000329**

Amount of Each Receipt this Period

76.32

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

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

200.84

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 140 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Hanpeter**Mailing Address 1735 N Paulina St  
Apt 218

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60622-1140 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Therapeutic Area Strategies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.94

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00001936

Amount of Each Receipt this Period

49.26

Full Name (Last, First, Middle Initial)

**B. Elizabeth Hanpeter**Mailing Address 1735 N Paulina St  
Apt 218

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60622-1140 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Therapeutic Area Strategies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.94

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00001952

Amount of Each Receipt this Period

49.26

Full Name (Last, First, Middle Initial)

**C. Elizabeth Hanpeter**Mailing Address 1735 N Paulina St  
Apt 218

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60622-1140 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Therapeutic Area Strategies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.94

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00001945

Amount of Each Receipt this Period

49.26

SUBTOTAL of Receipts This Page (optional)..... ►

147.78

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 141 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Dana A Hargrove**

Mailing Address 21013 Windmill Ridge St

City State Zip Code  
Pflugerville TX 78660-6549

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Payer Optim Exec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015\_00001882**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **B. Dana A Hargrove**

Mailing Address 21013 Windmill Ridge St

City State Zip Code  
Pflugerville TX 78660-6549

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Payer Optim Exec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015\_00001898**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **C. Dana A Hargrove**

Mailing Address 21013 Windmill Ridge St

City State Zip Code  
Pflugerville TX 78660-6549

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Payer Optim Exec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015\_00001891**

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 142 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Maureen T Harney**Mailing Address 746 W California Ter  
Apt 2

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60657-4517 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.66

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00000909

Amount of Each Receipt this Period

30.08

Full Name (Last, First, Middle Initial)

**B. Maureen T Harney**Mailing Address 746 W California Ter  
Apt 2

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60657-4517 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.66

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00000920

Amount of Each Receipt this Period

30.08

Full Name (Last, First, Middle Initial)

**C. Maureen T Harney**Mailing Address 746 W California Ter  
Apt 2

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60657-4517 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.66

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00000918

Amount of Each Receipt this Period

30.08

SUBTOTAL of Receipts This Page (optional)..... ►

90.24

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 143 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Jacquelin Harris**

Mailing Address 4325 N Cicero Ave  
Apt 1S

City State Zip Code  
Chicago IL 60641-1685

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Mgr II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00001039

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **B. Jacquelin Harris**

Mailing Address 4325 N Cicero Ave  
Apt 1S

City State Zip Code  
Chicago IL 60641-1685

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Mgr II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00001050

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

## **C. Jacquelin Harris**

Mailing Address 4325 N Cicero Ave  
Apt 1S

City State Zip Code  
Chicago IL 60641-1685

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Mgr II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

MM / DD / YYYY  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00001048

Amount of Each Receipt this Period

40.00

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

120.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 144 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Tracy Haymaker**

Mailing Address 564 Broadview Ave

City

Highland Park

State

IL

Zip Code

60035-4930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

SPM

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00001613**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Tracy Haymaker**

Mailing Address 564 Broadview Ave

City

Highland Park

State

IL

Zip Code

60035-4930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

SPM

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00001626**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Tracy Haymaker**

Mailing Address 564 Broadview Ave

City

Highland Park

State

IL

Zip Code

60035-4930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

SPM

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00001622**

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: PAGE 145 OF 402

(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Douglas E Heathcote**

Mailing Address 22 Bond Hollow Rd

City State Zip Code  
Sutton MA 01590-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr QA Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015\_00000643**

Amount of Each Receipt this Period

33.60

Full Name (Last, First, Middle Initial)

**B. Douglas E Heathcote**

Mailing Address 22 Bond Hollow Rd

City State Zip Code  
Sutton MA 01590-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr QA Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015\_00000652**

Amount of Each Receipt this Period

33.60

Full Name (Last, First, Middle Initial)

**C. Douglas E Heathcote**

Mailing Address 22 Bond Hollow Rd

City State Zip Code  
Sutton MA 01590-1703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr QA Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015\_00000651**

Amount of Each Receipt this Period

33.60

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

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

100.80

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

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

FOR LINE NUMBER: PAGE 146 OF 402  
(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Wayne R Heerema**

Mailing Address 149 Oak Lane Dr

City State Zip Code  
 Lake Villa IL 60046-8420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

S/M Util Engr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 02 / 2015

**Transaction ID : 7/2/2015\_00000737**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Wayne R Heerema**

Mailing Address 149 Oak Lane Dr

City State Zip Code  
 Lake Villa IL 60046-8420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

S/M Util Engr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2015

**Transaction ID : 7/16/2015\_00000747**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Wayne R Heerema**

Mailing Address 149 Oak Lane Dr

City State Zip Code  
 Lake Villa IL 60046-8420

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

S/M Util Engr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2015

**Transaction ID : 7/30/2015\_00000746**

Amount of Each Receipt this Period

25.00

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

75.00

**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 PageFOR LINE NUMBER: PAGE 147 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael Heifets**

Mailing Address 758 Deroo Loop

City  
HighwoodState  
ILZip Code  
60040-2015FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Medical Affairs TA Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

808.92

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00001984**

Amount of Each Receipt this Period

54.46

Full Name (Last, First, Middle Initial)

**B. Michael Heifets**

Mailing Address 758 Deroo Loop

City  
HighwoodState  
ILZip Code  
60040-2015FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Medical Affairs TA Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

808.92

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00002001**

Amount of Each Receipt this Period

54.46

Full Name (Last, First, Middle Initial)

**C. Michael Heifets**

Mailing Address 758 Deroo Loop

City  
HighwoodState  
ILZip Code  
60040-2015FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Medical Affairs TA Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

808.92

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00001993**

Amount of Each Receipt this Period

54.46

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

163.38

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 148 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. David Norbert Heinrichsmeyer**

Mailing Address 8113 64th Ave

City

Kenosha

State

WI

Zip Code

53142-1852

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Princ Pharm Sci I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000362

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. David Norbert Heinrichsmeyer**

Mailing Address 8113 64th Ave

City

Kenosha

State

WI

Zip Code

53142-1852

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Princ Pharm Sci I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000361

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Keith F Hendricks**

Mailing Address 651 Paddock Ln

City

Libertyville

State

IL

Zip Code

60048-3732

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Decision Support Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

968.76

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000563

Amount of Each Receipt this Period

65.22

SUBTOTAL of Receipts This Page (optional)..... ►

95.22

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 149 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Keith F Hendricks**

Mailing Address 651 Paddock Ln

City

Libertyville

State

IL

Zip Code

60048-3732

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Decision Support Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

968.76

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000572

Amount of Each Receipt this Period

65.22

Full Name (Last, First, Middle Initial)

## **B. Keith F Hendricks**

Mailing Address 651 Paddock Ln

City

Libertyville

State

IL

Zip Code

60048-3732

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Decision Support Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

968.76

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000571

Amount of Each Receipt this Period

65.22

Full Name (Last, First, Middle Initial)

## **C. Brian R Heringhaus**

Mailing Address 218 Lake Shore Dr

City

Ottawa

State

OH

Zip Code

45875-9410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.54

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00001501

Amount of Each Receipt this Period

32.24

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

162.68

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 150 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Brian R Heringhaus**

Mailing Address 218 Lake Shore Dr

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Ottawa | OH    | 45875-9410 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.54

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001510

Amount of Each Receipt this Period

32.24

Full Name (Last, First, Middle Initial)

**B. Brian R Heringhaus**

Mailing Address 218 Lake Shore Dr

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Ottawa | OH    | 45875-9410 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.54

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001508

Amount of Each Receipt this Period

32.24

Full Name (Last, First, Middle Initial)

**C. Kristina L. Hermach**

Mailing Address 918 San Francisco Ave NE

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Olympia | WA    | 98506-3954 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie

Occupation

Director State Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.45

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00002103

Amount of Each Receipt this Period

71.15

SUBTOTAL of Receipts This Page (optional)..... ►

135.63

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 PageFOR LINE NUMBER: PAGE 151 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Shannon K Hertzler**

Mailing Address 1747 Saddle Hill Rd

City

Libertyville

State

IL

Zip Code

60048-1556

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Princ Pharm Sci II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

317.13

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00002055**

Amount of Each Receipt this Period

21.39

Full Name (Last, First, Middle Initial)

**B. Shannon K Hertzler**

Mailing Address 1747 Saddle Hill Rd

City

Libertyville

State

IL

Zip Code

60048-1556

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Princ Pharm Sci II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

317.13

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00002071**

Amount of Each Receipt this Period

21.39

Full Name (Last, First, Middle Initial)

**C. Shannon K Hertzler**

Mailing Address 1747 Saddle Hill Rd

City

Libertyville

State

IL

Zip Code

60048-1556

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Princ Pharm Sci II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

317.13

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00002062**

Amount of Each Receipt this Period

21.39

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

64.17

**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 152 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Keith Hickman**

Mailing Address 7823 55th Ave

City

Kenosha

State

WI

Zip Code

53142-4151

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Asst Cont Fin Rept

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

683.85

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00001612

Amount of Each Receipt this Period

46.13

Full Name (Last, First, Middle Initial)

**B. Keith Hickman**

Mailing Address 7823 55th Ave

City

Kenosha

State

WI

Zip Code

53142-4151

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Asst Cont Fin Rept

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

683.85

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00001625

Amount of Each Receipt this Period

46.13

Full Name (Last, First, Middle Initial)

**C. Keith Hickman**

Mailing Address 7823 55th Ave

City

Kenosha

State

WI

Zip Code

53142-4151

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Asst Cont Fin Rept

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

683.85

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00001621

Amount of Each Receipt this Period

46.13

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

138.39

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 153 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Richard T Hickman**

Mailing Address 2745 Arlington Ave

City

Highland Park

State

IL

Zip Code

60035-1311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Associate Clinical Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000513

Amount of Each Receipt this Period

30.77

Full Name (Last, First, Middle Initial)

**B. Richard T Hickman**

Mailing Address 2745 Arlington Ave

City

Highland Park

State

IL

Zip Code

60035-1311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Associate Clinical Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000520

Amount of Each Receipt this Period

30.77

Full Name (Last, First, Middle Initial)

**C. Richard T Hickman**

Mailing Address 2745 Arlington Ave

City

Highland Park

State

IL

Zip Code

60035-1311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Associate Clinical Operations Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000519

Amount of Each Receipt this Period

30.77

SUBTOTAL of Receipts This Page (optional)..... ►

92.31

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 PageFOR LINE NUMBER: PAGE 154 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael A Higgins**

Mailing Address 415 E Sunnyside Ave

City

Libertyville

State

IL

Zip Code

60048-2936

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Internal Audit

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1031.67

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00000134**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Michael A Higgins**

Mailing Address 415 E Sunnyside Ave

City

Libertyville

State

IL

Zip Code

60048-2936

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Internal Audit

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1031.67

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00000135**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Michael A Higgins**

Mailing Address 415 E Sunnyside Ave

City

Libertyville

State

IL

Zip Code

60048-2936

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Internal Audit

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1031.67

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00000135**

Amount of Each Receipt this Period

75.00

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

225.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 155 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Michael V Hill**

Mailing Address 770 Thompson Blvd

City

Buffalo Grove

State

IL

Zip Code

60089-1014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Master Data

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000719

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Michael V Hill**

Mailing Address 770 Thompson Blvd

City

Buffalo Grove

State

IL

Zip Code

60089-1014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Master Data

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000718

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. W-Christian Hinrichs**

Mailing Address 1660 Brighton Dr

City

Mundelein

State

IL

Zip Code

60060-4506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Controller L &amp; A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.65

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000850

Amount of Each Receipt this Period

78.13

SUBTOTAL of Receipts This Page (optional)..... ►

108.13

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 156 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. W-Christian Hinrichs**

Mailing Address 1660 Brighton Dr

City

Mundelein

State

IL

Zip Code

60060-4506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Controller L &amp; A

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

390.65

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000861

Amount of Each Receipt this Period

78.13

Full Name (Last, First, Middle Initial)

**B. W-Christian Hinrichs**

Mailing Address 1660 Brighton Dr

City

Mundelein

State

IL

Zip Code

60060-4506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Controller L &amp; A

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

390.65

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000859

Amount of Each Receipt this Period

78.13

Full Name (Last, First, Middle Initial)

**C. Nathan H Hintz**

Mailing Address 238 W Ridgeland Ave

City

Waukegan

State

IL

Zip Code

60085-2034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Operations II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

607.86

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000493

Amount of Each Receipt this Period

41.08

SUBTOTAL of Receipts This Page (optional)..... ►

197.34

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 157 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Nathan H Hintz**

Mailing Address 238 W Ridgeland Ave

City

Waukegan

State

IL

Zip Code

60085-2034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Operations II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.86

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000500

Amount of Each Receipt this Period

41.08

Full Name (Last, First, Middle Initial)

**B. Nathan H Hintz**

Mailing Address 238 W Ridgeland Ave

City

Waukegan

State

IL

Zip Code

60085-2034

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Operations II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

607.86

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000499

Amount of Each Receipt this Period

41.08

Full Name (Last, First, Middle Initial)

**C. Gillian Hodkinson**

Mailing Address 5681 Forest View Ln

City

Libertyville

State

IL

Zip Code

60048-4811

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Clinical Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1320.69

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000177

Amount of Each Receipt this Period

92.31

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

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

174.47

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 158 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Gillian Hodkinson**

Mailing Address 5681 Forest View Ln

City

Libertyville

State

IL

Zip Code

60048-4811

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Clinical Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1320.69

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000179

Amount of Each Receipt this Period

92.31

Full Name (Last, First, Middle Initial)

**B. Gillian Hodkinson**

Mailing Address 5681 Forest View Ln

City

Libertyville

State

IL

Zip Code

60048-4811

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Clinical Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1320.69

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000179

Amount of Each Receipt this Period

92.31

Full Name (Last, First, Middle Initial)

**C. Elizabeth A Hoff**

Mailing Address 4708 White Oak Ln

City

Mount Pleasant

State

WI

Zip Code

53403-4448

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir, Public Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000218

Amount of Each Receipt this Period

30.00

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

214.62

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 159 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Elizabeth A Hoff**

Mailing Address 4708 White Oak Ln

City

Mount Pleasant

State

WI

Zip Code

53403-4448

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir, Public Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000220

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Elizabeth A Hoff**

Mailing Address 4708 White Oak Ln

City

Mount Pleasant

State

WI

Zip Code

53403-4448

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir, Public Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000219

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Tom E Horst**

Mailing Address 6412 King Arthur Ct

City

North Richland Hil

State

TX

Zip Code

76180-8410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

278.46

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000954

Amount of Each Receipt this Period

18.76

SUBTOTAL of Receipts This Page (optional)..... ►

78.76

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 160 OF 402  
(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Tom E Horst**

Mailing Address 6412 King Arthur Ct

City State Zip Code  
North Richland Hill TX 76180-8410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00000965

Amount of Each Receipt this Period

18.76

Full Name (Last, First, Middle Initial)

**B. Tom E Horst**

Mailing Address 6412 King Arthur Ct

City State Zip Code  
North Richland Hill TX 76180-8410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.46

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000963

Amount of Each Receipt this Period

18.76

Full Name (Last, First, Middle Initial)

**c. Stephen C Hough**

Mailing Address 765 N Sheridan Rd

City State Zip Code  
Lake Forest IL 60045-2244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.93

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00000463

Amount of Each Receipt this Period

40.71

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

78.23

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 161 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Stephen C Hough**

Mailing Address 765 N Sheridan Rd

City

Lake Forest

State

IL

Zip Code

60045-2244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

District Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

605.93

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00000469**

Amount of Each Receipt this Period

40.71

Full Name (Last, First, Middle Initial)

**B. Stephen C Hough**

Mailing Address 765 N Sheridan Rd

City

Lake Forest

State

IL

Zip Code

60045-2244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

District Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

605.93

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00000468**

Amount of Each Receipt this Period

40.71

Full Name (Last, First, Middle Initial)

**C. Cynthia Hughes-Coons**

Mailing Address 4008 Kenwood Ave

City

Gurnee

State

IL

Zip Code

60031-2865

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Division Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

655.65

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00002051**

Amount of Each Receipt this Period

30.00

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

111.42

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 162 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Cynthia Hughes-Coons**

Mailing Address 4008 Kenwood Ave

City

Gurnee

State

IL

Zip Code

60031-2865

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Division Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

655.65

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00002068

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Cynthia Hughes-Coons**

Mailing Address 4008 Kenwood Ave

City

Gurnee

State

IL

Zip Code

60031-2865

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Division Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

655.65

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00002059

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Thomas A Hurwich**Mailing Address 1300 N Lake Shore Dr  
Apt 32A

City

Chicago

State

IL

Zip Code

60610-5160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Controller

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2692.40

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000684

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)..... ►

252.30

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 163 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Thomas A Hurwich**

Mailing Address 1300 N Lake Shore Dr  
Apt 32A

City State Zip Code  
Chicago IL 60610-5160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.40

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000693

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**B. Thomas A Hurwich**

Mailing Address 1300 N Lake Shore Dr  
Apt 32A

City State Zip Code  
Chicago IL 60610-5160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.40

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000692

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**C. Jay J Hwang**

Mailing Address 2296 Farnsworth Ln

City State Zip Code  
Northbrook IL 60062-6058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Tax Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.05

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00001532

Amount of Each Receipt this Period

43.81

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

428.41

**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 PageFOR LINE NUMBER: PAGE 164 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jay J Hwang**

Mailing Address 2296 Farnsworth Ln

City

Northbrook

State

IL

Zip Code

60062-6058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Tax Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

264.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00001529**

Amount of Each Receipt this Period

43.81

Full Name (Last, First, Middle Initial)

**B. James B Hynd**

Mailing Address 741 E Sunnyside Ave

City

Libertyville

State

IL

Zip Code

60048-2903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US ENDO/METABOLICS

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00001776**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. James B Hynd**

Mailing Address 741 E Sunnyside Ave

City

Libertyville

State

IL

Zip Code

60048-2903

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US ENDO/METABOLICS

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00001793**

Amount of Each Receipt this Period

20.00

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

83.81

**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 PageFOR LINE NUMBER: PAGE 165 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. James B Hynd**

Mailing Address 741 E Sunnyside Ave

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-2903 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US ENDO/METABOLICS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001787

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Lynne C Inman**

Mailing Address 2336 Lawndale Ave

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Evanston | IL    | 60201-1852 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00001907

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Lynne C Inman**

Mailing Address 2336 Lawndale Ave

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Evanston | IL    | 60201-1852 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001923

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 166 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Lynne C Inman**

Mailing Address 2336 Lawndale Ave

City

Evanston

State

IL

Zip Code

60201-1852

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Compliance Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001916

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Edmond W Israelski**

Mailing Address 610 Dock Dr

City

Lake Barrington

State

IL

Zip Code

60010-1518

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Human Factors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000142

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Edmond W Israelski**

Mailing Address 610 Dock Dr

City

Lake Barrington

State

IL

Zip Code

60010-1518

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Human Factors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000144

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 167 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Edmond W Israelski**

Mailing Address 610 Dock Dr

City

Lake Barrington

State

IL

Zip Code

60010-1518

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Human Factors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000144

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Rinu Jacob**

Mailing Address 5 Willings Alley Mews

City

Philadelphia

State

PA

Zip Code

19106-3827

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Medical Science Liaison

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.48

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00001686

Amount of Each Receipt this Period

30.96

Full Name (Last, First, Middle Initial)

**C. Rinu Jacob**

Mailing Address 5 Willings Alley Mews

City

Philadelphia

State

PA

Zip Code

19106-3827

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Medical Science Liaison

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.48

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 1 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001701

Amount of Each Receipt this Period

30.96

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

81.92

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 168 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Rinu Jacob**

Mailing Address 5 Willings Alley Mews

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Philadelphia | PA    | 19106-3827 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Medical Science Liaison

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

459.48

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00001694**

Amount of Each Receipt this Period

30.96

Full Name (Last, First, Middle Initial)

**B. Peer Bryngel Jacobson**

Mailing Address 849 Liberty Bell Ln

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-3451 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Associate Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

641.01

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00000496**

Amount of Each Receipt this Period

43.19

Full Name (Last, First, Middle Initial)

**C. Peer Bryngel Jacobson**

Mailing Address 849 Liberty Bell Ln

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-3451 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Associate Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

641.01

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00000503**

Amount of Each Receipt this Period

43.19

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

117.34

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 169 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Peer Bryngel Jacobson**

Mailing Address 849 Liberty Bell Ln

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-3451 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Associate Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

641.01

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000502

Amount of Each Receipt this Period

43.19

Full Name (Last, First, Middle Initial)

**B. Rita I Jain**Mailing Address 1720 Maple Ave  
Apt 2740

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Evanston | IL    | 60201-3160 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Men/Women Health Met Devn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2061.22

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000538

Amount of Each Receipt this Period

141.35

Full Name (Last, First, Middle Initial)

**C. Rita I Jain**Mailing Address 1720 Maple Ave  
Apt 2740

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Evanston | IL    | 60201-3160 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Men/Women Health Met Devn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2061.22

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000545

Amount of Each Receipt this Period

141.35

SUBTOTAL of Receipts This Page (optional)..... ►

325.89

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 PageFOR LINE NUMBER: PAGE 170 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Rita I Jain**Mailing Address 1720 Maple Ave  
Apt 2740

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Evanston | IL    | 60201-3160 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Men/Women Health Met Devn

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2061.22

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000544

Amount of Each Receipt this Period

141.35

Full Name (Last, First, Middle Initial)

**B. Cathy J Jensen**

Mailing Address 2080 Tremont Ct

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-4801 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir IT Quality &amp; Reg Assurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.07

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000064

Amount of Each Receipt this Period

44.89

Full Name (Last, First, Middle Initial)

**C. Cathy J Jensen**

Mailing Address 2080 Tremont Ct

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-4801 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir IT Quality &amp; Reg Assurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.07

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000065

Amount of Each Receipt this Period

44.89

SUBTOTAL of Receipts This Page (optional)..... ►

231.13

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 171 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Cathy J Jensen**

Mailing Address 2080 Tremont Ct

City

Libertyville

State

IL

Zip Code

60048-4801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir IT Quality & Reg Assurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000065

Amount of Each Receipt this Period

44.89

Full Name (Last, First, Middle Initial)

**B. William J Johnson**

Mailing Address 2060 Cranbrook Rd

City

Libertyville

State

IL

Zip Code

60048-1507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Director, Pipeline Governance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00000430

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**C. William J Johnson**

Mailing Address 2060 Cranbrook Rd

City

Libertyville

State

IL

Zip Code

60048-1507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Director, Pipeline Governance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00000435

Amount of Each Receipt this Period

85.00

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

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

214.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 172 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. William J Johnson**

Mailing Address 2060 Cranbrook Rd

City

Libertyville

State

IL

Zip Code

60048-1507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Director, Pipeline Governance

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000434

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**B. Michael A Jones**

Mailing Address 108 Bridlepath Dr

City

Lindenhurst

State

IL

Zip Code

60046-4408

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US MATURE BUSI

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1711.29

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000504

Amount of Each Receipt this Period

115.43

Full Name (Last, First, Middle Initial)

**C. Michael A Jones**

Mailing Address 108 Bridlepath Dr

City

Lindenhurst

State

IL

Zip Code

60046-4408

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US MATURE BUSI

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1711.29

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000511

Amount of Each Receipt this Period

115.43

SUBTOTAL of Receipts This Page (optional)..... ►

315.86

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

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 173 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael A Jones**

Mailing Address 108 Bridlepath Dr

City

Lindenhurst

State

IL

Zip Code

60046-4408

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US MATURE BUSI

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1711.29

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00000510**

Amount of Each Receipt this Period

115.43

Full Name (Last, First, Middle Initial)

**B. Molly M Joyce**

Mailing Address 2715 Priscilla Ave

City

Highland Park

State

IL

Zip Code

60035-1337

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Counsel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

219.33

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00002078**

Amount of Each Receipt this Period

73.11

Full Name (Last, First, Middle Initial)

**C. Floreine R Kahn**

Mailing Address 1418 El Tejon Way

City

Sacramento

State

CA

Zip Code

95864-2908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, State Government Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1145.67

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00002002**

Amount of Each Receipt this Period

77.02

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

265.56

**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 174 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Floreine R Kahn**

Mailing Address 1418 El Tejon Way

City

Sacramento

State

CA

Zip Code

95864-2908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, State Government Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1145.67

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00002018

Amount of Each Receipt this Period

77.02

Full Name (Last, First, Middle Initial)

**B. Floreine R Kahn**

Mailing Address 1418 El Tejon Way

City

Sacramento

State

CA

Zip Code

95864-2908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, State Government Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1145.67

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00002010

Amount of Each Receipt this Period

77.02

Full Name (Last, First, Middle Initial)

**C. Amy A Kamai**

Mailing Address 1520 Greystone Dr

City

Gurnee

State

IL

Zip Code

60031-9128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr App Technlgies

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

423.27

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000577

Amount of Each Receipt this Period

28.55

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

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

182.59

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

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

FOR LINE NUMBER: PAGE 175 OF 402  
(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Amy A Kamai**

Mailing Address 1520 Greystone Dr

City State Zip Code  
Gurnee IL 60031-9128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr App Technlgies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015 00000586**

Amount of Each Receipt this Period

28.55

Full Name (Last, First, Middle Initial)

**B. Amy A Kamai**

Mailing Address 1520 Greystone Dr

City State Zip Code  
Gurnee IL 60031-9128

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr App Technlgies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015 00000585**

Amount of Each Receipt this Period

28.55

Full Name (Last, First, Middle Initial)

**C. Andrew G. Kaplan**

Mailing Address 712 15th St SE

City State Zip Code  
Washington DC 20003-3019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Fed Govt Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015 00002006**

Amount of Each Receipt this Period

200.00

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

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

257.10

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 176 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Andrew G. Kaplan**

Mailing Address 712 15th St SE

City

Washington

State

DC

Zip Code

20003-3019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Fed Govt Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00002022

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**B. Andrew G. Kaplan**

Mailing Address 712 15th St SE

City

Washington

State

DC

Zip Code

20003-3019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Fed Govt Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2800.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00002014

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**c. Mark David Kappel**

Mailing Address 8 Shoshoni Trl

City

Lake Villa

State

IL

Zip Code

60046-8730

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr QA-Abbvie Park

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

508.44

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000436

Amount of Each Receipt this Period

34.36

SUBTOTAL of Receipts This Page (optional)..... ►

434.36

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 177 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Mark David Kappel**

Mailing Address 8 Shoshoni Trl

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Lake Villa | IL    | 60046-8730 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr QA-Abbvie Park

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.44

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000441

Amount of Each Receipt this Period

34.36

Full Name (Last, First, Middle Initial)

**B. Mark David Kappel**

Mailing Address 8 Shoshoni Trl

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Lake Villa | IL    | 60046-8730 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr QA-Abbvie Park

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

508.44

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000440

Amount of Each Receipt this Period

34.36

Full Name (Last, First, Middle Initial)

**C. Joseph F Karich**

Mailing Address 1623 Carriage Ct

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-1503 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Controller - Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

990.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000696

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)..... ►

138.72

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 178 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Joseph F Karich**

Mailing Address 1623 Carriage Ct

City

Libertyville

State

IL

Zip Code

60048-1503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Controller - Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

990.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000705

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

**B. Joseph F Karich**

Mailing Address 1623 Carriage Ct

City

Libertyville

State

IL

Zip Code

60048-1503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Controller - Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

990.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000704

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

**C. Nareen Katta**

Mailing Address 452 Mockingbird Ct

City

Lindenhurst

State

IL

Zip Code

60046-4933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Dir System Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

533.37

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000006

Amount of Each Receipt this Period

36.25

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

176.25

**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 PageFOR LINE NUMBER: PAGE 179 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Nareen Katta**

Mailing Address 452 Mockingbird Ct

City

Lindenhurst

State

IL

Zip Code

60046-4933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Dir System Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

533.37

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000006

Amount of Each Receipt this Period

36.25

Full Name (Last, First, Middle Initial)

**B. Nareen Katta**

Mailing Address 452 Mockingbird Ct

City

Lindenhurst

State

IL

Zip Code

60046-4933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Dir System Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

533.37

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000006

Amount of Each Receipt this Period

36.25

Full Name (Last, First, Middle Initial)

**C. Urvashi Kaul**

Mailing Address 1904 Brandywyn Ln

City

Buffalo Grove

State

IL

Zip Code

60089-6688

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Systems Architect

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

524.94

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00001946

Amount of Each Receipt this Period

35.44

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

107.94

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 180 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Urvashi Kaul**

Mailing Address 1904 Brandywyn Ln

City

Buffalo Grove

State

IL

Zip Code

60089-6688

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Systems Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.94

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001963

Amount of Each Receipt this Period

35.44

Full Name (Last, First, Middle Initial)

**B. Urvashi Kaul**

Mailing Address 1904 Brandywyn Ln

City

Buffalo Grove

State

IL

Zip Code

60089-6688

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Systems Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.94

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001956

Amount of Each Receipt this Period

35.44

Full Name (Last, First, Middle Initial)

**C. Scott Kaya**

Mailing Address 1716 Young Dr

City

Libertyville

State

IL

Zip Code

60048-3901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Director Purchasing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00001973

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.88

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 181 OF 402

(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Scott Kaya**

Mailing Address 1716 Young Dr

City

Libertyville

State

IL

Zip Code

60048-3901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Director Purchasing

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

**Transaction ID : 7/16/2015 00001990**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Scott Kaya**

Mailing Address 1716 Young Dr

City

Libertyville

State

IL

Zip Code

60048-3901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Director Purchasing

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

**Transaction ID : 7/30/2015 00001982**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Cori M Kelly**

Mailing Address 192 Acorn Ln

City

Libertyville

State

IL

Zip Code

60048-2158

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Spec Prcpl Med Saf

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

264.33

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

**Transaction ID : 7/2/2015 00000617**

Amount of Each Receipt this Period

17.83

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

57.83

**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 PageFOR LINE NUMBER: PAGE 182 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Cori M Kelly**

Mailing Address 192 Acorn Ln

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-2158 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Spec Prcl Med Saf

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.33

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

**Transaction ID : 7/16/2015 00000627**

Amount of Each Receipt this Period

17.83

Full Name (Last, First, Middle Initial)

**B. Cori M Kelly**

Mailing Address 192 Acorn Ln

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-2158 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Spec Prcl Med Saf

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.33

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

**Transaction ID : 7/30/2015 00000626**

Amount of Each Receipt this Period

17.83

Full Name (Last, First, Middle Initial)

**C. Patrick John Kenefick**

Mailing Address 4745 105th Pl

|                  |       |            |
|------------------|-------|------------|
| City             | State | Zip Code   |
| Pleasant Prairie | WI    | 53158-3530 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Manufacturing Quality

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1236.29

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

**Transaction ID : 7/2/2015 00000791**

Amount of Each Receipt this Period

94.84

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

130.50

**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 183 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Patrick John Kenefick**

Mailing Address 4745 105th Pl

City

Pleasant Prairie

State

WI

Zip Code

53158-3530

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Manufacturing Quality

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1236.29

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00000802

Amount of Each Receipt this Period

94.84

Full Name (Last, First, Middle Initial)

**B. Patrick John Kenefick**

Mailing Address 4745 105th Pl

City

Pleasant Prairie

State

WI

Zip Code

53158-3530

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Manufacturing Quality

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1236.29

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000801

Amount of Each Receipt this Period

94.84

Full Name (Last, First, Middle Initial)

**C. Thomas E Kenney**

Mailing Address 537 Long Hill Rd

City

Gurnee

State

IL

Zip Code

60031-3260

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Commercial Services

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

967.15

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00000414

Amount of Each Receipt this Period

76.39

SUBTOTAL of Receipts This Page (optional)..... ►

266.07

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 PageFOR LINE NUMBER: PAGE 184 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Keith A Kentala**

Mailing Address 1562 47th Ave

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Kenosha | WI    | 53144-1288 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Operations Commercial Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

911.61

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00000400**

Amount of Each Receipt this Period

71.37

Full Name (Last, First, Middle Initial)

**B. Keith A Kentala**

Mailing Address 1562 47th Ave

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Kenosha | WI    | 53144-1288 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Operations Commercial Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

911.61

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00000406**

Amount of Each Receipt this Period

71.37

Full Name (Last, First, Middle Initial)

**C. Keith A Kentala**

Mailing Address 1562 47th Ave

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Kenosha | WI    | 53144-1288 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Operations Commercial Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

911.61

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00000405**

Amount of Each Receipt this Period

71.37

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

214.11

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 185 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Nancy Mi Kim**Mailing Address 6503 N Greenview Ave  
Apt 3

City Chicago State IL Zip Code 60626-5065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sect Head Legal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.86

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00000518

Amount of Each Receipt this Period

56.34

Full Name (Last, First, Middle Initial)

**B. Nancy Mi Kim**Mailing Address 6503 N Greenview Ave  
Apt 3

City Chicago State IL Zip Code 60626-5065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sect Head Legal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.86

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00000525

Amount of Each Receipt this Period

56.34

Full Name (Last, First, Middle Initial)

**C. Nancy Mi Kim**Mailing Address 6503 N Greenview Ave  
Apt 3

City Chicago State IL Zip Code 60626-5065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sect Head Legal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

832.86

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00000524

Amount of Each Receipt this Period

56.34

SUBTOTAL of Receipts This Page (optional)..... ►

169.02

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 186 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Brian King**

Mailing Address 2940 Glenarye Dr

City

Lindenhurst

State

IL

Zip Code

60046-7926

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Mgr I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.52

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00001690

Amount of Each Receipt this Period

19.62

Full Name (Last, First, Middle Initial)

**B. Brian King**

Mailing Address 2940 Glenarye Dr

City

Lindenhurst

State

IL

Zip Code

60046-7926

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Mgr I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.52

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00001705

Amount of Each Receipt this Period

19.62

Full Name (Last, First, Middle Initial)

**C. Brian King**

Mailing Address 2940 Glenarye Dr

City

Lindenhurst

State

IL

Zip Code

60046-7926

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Mgr I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

275.52

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00001698

Amount of Each Receipt this Period

19.62

SUBTOTAL of Receipts This Page (optional)..... ►

58.86

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

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

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

FOR LINE NUMBER: PAGE 187 OF 402

(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Steven A King**

Mailing Address 16713 W Orchard Valley Dr

City State Zip Code  
Gurnee IL 60031-2450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Development Sciences

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1084.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00000205

Amount of Each Receipt this Period

73.72

Full Name (Last, First, Middle Initial)

**B. Steven A King**

Mailing Address 16713 W Orchard Valley Dr

City State Zip Code  
Gurnee IL 60031-2450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Development Sciences

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1084.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00000207

Amount of Each Receipt this Period

73.72

Full Name (Last, First, Middle Initial)

**C. Steven A King**

Mailing Address 16713 W Orchard Valley Dr

City State Zip Code  
Gurnee IL 60031-2450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Development Sciences

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1084.74

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00000206

Amount of Each Receipt this Period

73.72

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

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

221.16

# **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 188 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jonathan R Kirsch**

Mailing Address 50018 Cherry Hill Rd

City

State

Zip Code

Canton

MI

48187-4876

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

583.50

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00000597

Amount of Each Receipt this Period

39.58

Full Name (Last, First, Middle Initial)

**B. Jonathan R Kirsch**

Mailing Address 50018 Cherry Hill Rd

City

State

Zip Code

Canton

MI

48187-4876

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

583.50

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00000606

Amount of Each Receipt this Period

39.58

Full Name (Last, First, Middle Initial)

**C. Jonathan R Kirsch**

Mailing Address 50018 Cherry Hill Rd

City

State

Zip Code

Canton

MI

48187-4876

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

583.50

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00000605

Amount of Each Receipt this Period

39.58

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

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

118.74

# **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 189 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Lilia A Kiselev**

Mailing Address 1655 We Go Trl

City

Deerfield

State

IL

Zip Code

60015-4609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Decision Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.66

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015\_00000618**

Amount of Each Receipt this Period

65.38

Full Name (Last, First, Middle Initial)

**B. Lilia A Kiselev**

Mailing Address 1655 We Go Trl

City

Deerfield

State

IL

Zip Code

60015-4609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Decision Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.66

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015\_00000628**

Amount of Each Receipt this Period

65.38

Full Name (Last, First, Middle Initial)

**C. Lilia A Kiselev**

Mailing Address 1655 We Go Trl

City

Deerfield

State

IL

Zip Code

60015-4609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Decision Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.66

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015\_00000627**

Amount of Each Receipt this Period

65.38

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

196.14

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 190 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Cheri Enders Klein**

Mailing Address 1933 Barberry Rd

City

Northbrook

State

IL

Zip Code

60062-5804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Cppm Sr Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

680.31

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000629

Amount of Each Receipt this Period

45.89

Full Name (Last, First, Middle Initial)

**B. Cheri Enders Klein**

Mailing Address 1933 Barberry Rd

City

Northbrook

State

IL

Zip Code

60062-5804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Cppm Sr Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

680.31

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000639

Amount of Each Receipt this Period

45.89

Full Name (Last, First, Middle Initial)

**C. Cheri Enders Klein**

Mailing Address 1933 Barberry Rd

City

Northbrook

State

IL

Zip Code

60062-5804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Cppm Sr Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

680.31

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000638

Amount of Each Receipt this Period

45.89

SUBTOTAL of Receipts This Page (optional)..... ►

137.67

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 191 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Rebecca E Kline**

Mailing Address 1602 Wickham Ct

City

Libertyville

State

IL

Zip Code

60048-1577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Dir, Fed Audit And Salt Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1028.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015\_00000253**

Amount of Each Receipt this Period

69.22

Full Name (Last, First, Middle Initial)

**B. Rebecca E Kline**

Mailing Address 1602 Wickham Ct

City

Libertyville

State

IL

Zip Code

60048-1577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Dir, Fed Audit And Salt Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1028.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015\_00000256**

Amount of Each Receipt this Period

69.22

Full Name (Last, First, Middle Initial)

**C. Rebecca E Kline**

Mailing Address 1602 Wickham Ct

City

Libertyville

State

IL

Zip Code

60048-1577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Dir, Fed Audit And Salt Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1028.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015\_00000255**

Amount of Each Receipt this Period

69.22

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

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

207.66

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 192 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Anthony J Klyczek**

Mailing Address 13411 Forest Ridge Dr

City

Palos Heights

State

IL

Zip Code

60463-3163

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Hm010-Sr Proj Mgr IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.60

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000022

Amount of Each Receipt this Period

26.50

Full Name (Last, First, Middle Initial)

**B. Anthony J Klyczek**

Mailing Address 13411 Forest Ridge Dr

City

Palos Heights

State

IL

Zip Code

60463-3163

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Hm010-Sr Proj Mgr IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.60

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000022

Amount of Each Receipt this Period

26.50

Full Name (Last, First, Middle Initial)

**C. Anthony J Klyczek**

Mailing Address 13411 Forest Ridge Dr

City

Palos Heights

State

IL

Zip Code

60463-3163

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Hm010-Sr Proj Mgr IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.60

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000022

Amount of Each Receipt this Period

26.50

SUBTOTAL of Receipts This Page (optional)..... ►

79.50

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 PageFOR LINE NUMBER: PAGE 193 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Patricia L Knoblauch**

Mailing Address 594 Harvard Ct

City

Lindenhurst

State

IL

Zip Code

60046-7895

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Quality Systems

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

956.97

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00000675**

Amount of Each Receipt this Period

64.55

Full Name (Last, First, Middle Initial)

**B. Patricia L Knoblauch**

Mailing Address 594 Harvard Ct

City

Lindenhurst

State

IL

Zip Code

60046-7895

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Quality Systems

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

956.97

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 1 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00000684**

Amount of Each Receipt this Period

64.55

Full Name (Last, First, Middle Initial)

**C. Patricia L Knoblauch**

Mailing Address 594 Harvard Ct

City

Lindenhurst

State

IL

Zip Code

60046-7895

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Quality Systems

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

956.97

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00000683**

Amount of Each Receipt this Period

64.55

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

193.65

**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 194 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Timothy E Kolenda**

Mailing Address 25 E Superior St  
Apt 3205

City State Zip Code  
Chicago IL 60611-2591

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Treasurer Ctu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015\_00001986**

Amount of Each Receipt this Period

32.37

Full Name (Last, First, Middle Initial)

## **B. Timothy E Kolenda**

Mailing Address 25 E Superior St  
Apt 3205

City State Zip Code  
Chicago IL 60611-2591

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Treasurer Ctu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015\_00002003**

Amount of Each Receipt this Period

32.37

Full Name (Last, First, Middle Initial)

## **C. Timothy E Kolenda**

Mailing Address 25 E Superior St  
Apt 3205

City State Zip Code  
Chicago IL 60611-2591

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Treasurer Ctu

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.81

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015\_00001995**

Amount of Each Receipt this Period

32.37

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

97.11

**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 195 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Tom D Kotsinis**

Mailing Address 3505 Merle Ln

City

Northbrook

State

IL

Zip Code

60062-7115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, IT Infrastructure

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00000716

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

**B. Tom D Kotsinis**

Mailing Address 3505 Merle Ln

City

Northbrook

State

IL

Zip Code

60062-7115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, IT Infrastructure

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00000726

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

**C. Tom D Kotsinis**

Mailing Address 3505 Merle Ln

City

Northbrook

State

IL

Zip Code

60062-7115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, IT Infrastructure

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00000725

Amount of Each Receipt this Period

70.00

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

210.00

**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 PageFOR LINE NUMBER: PAGE 196 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Pamela J Kowalczyk**

Mailing Address 8319 65th Pl

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Kenosha | WI    | 53142-7581 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Finance Supervisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.43

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

**Transaction ID : 7/2/2015\_00000550**

Amount of Each Receipt this Period

28.09

Full Name (Last, First, Middle Initial)

**B. Pamela J Kowalczyk**

Mailing Address 8319 65th Pl

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Kenosha | WI    | 53142-7581 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Finance Supervisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.43

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

**Transaction ID : 7/16/2015\_00000558**

Amount of Each Receipt this Period

28.09

Full Name (Last, First, Middle Initial)

**C. Pamela J Kowalczyk**

Mailing Address 8319 65th Pl

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Kenosha | WI    | 53142-7581 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Finance Supervisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.43

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

**Transaction ID : 7/30/2015\_00000557**

Amount of Each Receipt this Period

28.09

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

84.27

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 197 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Gregory J Kozar**

Mailing Address 5671 Shadowbrook Ct

City

Libertyville

State

IL

Zip Code

60048-4272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, US Medical Science Liaison

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015\_00001378**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Gregory J Kozar**

Mailing Address 5671 Shadowbrook Ct

City

Libertyville

State

IL

Zip Code

60048-4272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, US Medical Science Liaison

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015\_00001389**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Gregory J Kozar**

Mailing Address 5671 Shadowbrook Ct

City

Libertyville

State

IL

Zip Code

60048-4272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, US Medical Science Liaison

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015\_00001388**

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 198 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Matthew F Krumrai**

Mailing Address 861 Forest View Way

City

Antioch

State

IL

Zip Code

60002-6216

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Dir QA Gcp Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

899.13

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00000288

Amount of Each Receipt this Period

60.53

Full Name (Last, First, Middle Initial)

**B. Matthew F Krumrai**

Mailing Address 861 Forest View Way

City

Antioch

State

IL

Zip Code

60002-6216

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Dir QA Gcp Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

899.13

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00000292

Amount of Each Receipt this Period

60.53

Full Name (Last, First, Middle Initial)

**C. Matthew F Krumrai**

Mailing Address 861 Forest View Way

City

Antioch

State

IL

Zip Code

60002-6216

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Dir QA Gcp Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

899.13

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00000291

Amount of Each Receipt this Period

60.53

SUBTOTAL of Receipts This Page (optional)..... ►

181.59

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 199 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Aaron N Krupp**

Mailing Address 2822 Chancellors Way NE

City

Washington

State

DC

Zip Code

20017-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Federal Government Affairs -

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1072.20

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00001726

Amount of Each Receipt this Period

72.32

Full Name (Last, First, Middle Initial)

**B. Aaron N Krupp**

Mailing Address 2822 Chancellors Way NE

City

Washington

State

DC

Zip Code

20017-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Federal Government Affairs -

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1072.20

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00001741

Amount of Each Receipt this Period

72.32

Full Name (Last, First, Middle Initial)

**C. Aaron N Krupp**

Mailing Address 2822 Chancellors Way NE

City

Washington

State

DC

Zip Code

20017-1415

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Federal Government Affairs -

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1072.20

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00001734

Amount of Each Receipt this Period

72.32

SUBTOTAL of Receipts This Page (optional)..... ►

216.96

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 PageFOR LINE NUMBER: PAGE 200 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kimberly R Kubik**

Mailing Address 735 Brickwood Ln

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Milton | GA    | 30004-0875 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.57

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00000806**

Amount of Each Receipt this Period

39.85

Full Name (Last, First, Middle Initial)

**B. Kimberly R Kubik**

Mailing Address 735 Brickwood Ln

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Milton | GA    | 30004-0875 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.57

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 | 6 | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00000817**

Amount of Each Receipt this Period

39.85

Full Name (Last, First, Middle Initial)

**C. Kimberly R Kubik**

Mailing Address 735 Brickwood Ln

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Milton | GA    | 30004-0875 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.57

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 | 0 | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00000816**

Amount of Each Receipt this Period

39.85

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

119.55

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 201 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Philip R Kym**

Mailing Address 1002 Gracewood Dr

City

Libertyville

State

IL

Zip Code

60048-2520

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Chemistry

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00000326**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Mary Ann Lacroix**

Mailing Address 712 Main St

City

Antioch

State

IL

Zip Code

60002-1376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Clinical Trial Payment Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

678.99

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00001760**

Amount of Each Receipt this Period

46.35

Full Name (Last, First, Middle Initial)

**C. Mary Ann Lacroix**

Mailing Address 712 Main St

City

Antioch

State

IL

Zip Code

60002-1376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Clinical Trial Payment Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

678.99

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00001777**

Amount of Each Receipt this Period

46.35

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

112.70

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 202 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Mary Ann Lacroix**

Mailing Address 712 Main St

City

Antioch

State

IL

Zip Code

60002-1376

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Clinical Trial Payment Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

678.99

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001770

Amount of Each Receipt this Period

46.35

Full Name (Last, First, Middle Initial)

**B. Chad Lacrosse**

Mailing Address 2563 Savanna Dr

City

Wauconda

State

IL

Zip Code

60084-5009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Gpo IT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

654.78

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000789

Amount of Each Receipt this Period

44.50

Full Name (Last, First, Middle Initial)

**C. Chad Lacrosse**

Mailing Address 2563 Savanna Dr

City

Wauconda

State

IL

Zip Code

60084-5009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Gpo IT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

654.78

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 6 |   |   | 2 | 0 | 1 |

Transaction ID : 7/16/2015 00000800

Amount of Each Receipt this Period

44.50

SUBTOTAL of Receipts This Page (optional)..... ►

135.35

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 203 OF 402  
(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Chad Lacrosse**

Mailing Address 2563 Savanna Dr

City State Zip Code  
Wauconda IL 60084-5009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Gpo IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

654.78

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000799

Amount of Each Receipt this Period

44.50

Full Name (Last, First, Middle Initial)

## **B. Roy Ladd**

Mailing Address 28525 Oakhaven Ct

City State Zip Code  
Lake Bluff IL 60044-3001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir IT Glb Phrm Reg & Ms

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  
07 / 02 / 2015

Transaction ID : 7/2/2015 00002011

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **C. Roy Ladd**

Mailing Address 28525 Oakhaven Ct

City State Zip Code  
Lake Bluff IL 60044-3001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir IT Glb Phrm Reg & Ms

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  
07 / 16 / 2015

Transaction ID : 7/16/2015 00002027

Amount of Each Receipt this Period

20.00

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

84.50

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 204 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Roy Ladd**

Mailing Address 28525 Oakhaven Ct

City

Lake Bluff

State

IL

Zip Code

60044-3001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir IT Glb Phrm Reg &amp; Ms

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00002019

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Scott C Lakes**

Mailing Address 114 Hampton Blvd

City

Lake Bluff

State

IL

Zip Code

60044-1162

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

National Sales Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

438.30

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001492

Amount of Each Receipt this Period

29.62

Full Name (Last, First, Middle Initial)

**C. Scott C Lakes**

Mailing Address 114 Hampton Blvd

City

Lake Bluff

State

IL

Zip Code

60044-1162

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

National Sales Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

438.30

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001501

Amount of Each Receipt this Period

29.62

SUBTOTAL of Receipts This Page (optional)..... ►

79.24

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 205 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Scott C Lakes**

Mailing Address 114 Hampton Blvd

City

Lake Bluff

State

IL

Zip Code

60044-1162

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

National Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.30

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001499

Amount of Each Receipt this Period

29.62

Full Name (Last, First, Middle Initial)

**B. Ralph H Lambalot**

Mailing Address 5 Pond St

City

Wrentham

State

MA

Zip Code

02093-1139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Biologics Development And Launch

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1635.75

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001609

Amount of Each Receipt this Period

110.65

Full Name (Last, First, Middle Initial)

**C. Ralph H Lambalot**

Mailing Address 5 Pond St

City

Wrentham

State

MA

Zip Code

02093-1139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Biologics Development And Launch

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1635.75

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001622

Amount of Each Receipt this Period

110.65

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

250.92

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 206 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Ralph H Lambalot**

Mailing Address 5 Pond St

City

Wrentham

State

MA

Zip Code

02093-1139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Biologics Development And Launch

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1635.75

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001618

Amount of Each Receipt this Period

110.65

Full Name (Last, First, Middle Initial)

**B. Nataskia Shermain Lampe**

Mailing Address 401 Locust Rd

City

Wilmette

State

IL

Zip Code

60091-3020

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Gbl Reg Lead-Prod Strat

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

833.19

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001957

Amount of Each Receipt this Period

56.35

Full Name (Last, First, Middle Initial)

**C. Nataskia Shermain Lampe**

Mailing Address 401 Locust Rd

City

Wilmette

State

IL

Zip Code

60091-3020

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Gbl Reg Lead-Prod Strat

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

833.19

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001974

Amount of Each Receipt this Period

56.35

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

223.35

**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 207 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Nataskia Shermain Lampe**

Mailing Address 401 Locust Rd

City

Wilmette

State

IL

Zip Code

60091-3020

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Gbl Reg Lead-Prod Strat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.19

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00001967

Amount of Each Receipt this Period

56.35

Full Name (Last, First, Middle Initial)

**B. Annika K Lane**

Mailing Address 288 N Deere Park Dr W

City

Highland Park

State

IL

Zip Code

60035-5364

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

GM Sales & Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

719.28

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000337

Amount of Each Receipt this Period

48.52

Full Name (Last, First, Middle Initial)

**C. Annika K Lane**

Mailing Address 288 N Deere Park Dr W

City

Highland Park

State

IL

Zip Code

60035-5364

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

GM Sales & Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

719.28

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000343

Amount of Each Receipt this Period

48.52

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

153.39

**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 PageFOR LINE NUMBER: PAGE 208 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Annika K Lane**

Mailing Address 288 N Deere Park Dr W

City

Highland Park

State

IL

Zip Code

60035-5364

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

GM Sales &amp; Mktg

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

719.28

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00000342**

Amount of Each Receipt this Period

48.52

Full Name (Last, First, Middle Initial)

**B. Ryan M Lawler**

Mailing Address 9235 Cooper Rd

City

Pleasant Prairie

State

WI

Zip Code

53158-5500

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Bus Sys Cons

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

485.04

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00000216**

Amount of Each Receipt this Period

32.72

Full Name (Last, First, Middle Initial)

**C. Ryan M Lawler**

Mailing Address 9235 Cooper Rd

City

Pleasant Prairie

State

WI

Zip Code

53158-5500

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Bus Sys Cons

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

485.04

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 1 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00000218**

Amount of Each Receipt this Period

32.72

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

113.96

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 209 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Ryan M Lawler**

Mailing Address 9235 Cooper Rd

City

Pleasant Prairie

State

WI

Zip Code

53158-5500

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Bus Sys Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.04

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000217

Amount of Each Receipt this Period

32.72

Full Name (Last, First, Middle Initial)

**B. Andrea Dudding Le**

Mailing Address 3024 Park Pl

City

Evanston

State

IL

Zip Code

60201-1141

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Tax Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001989

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Andrea Dudding Le**

Mailing Address 3024 Park Pl

City

Evanston

State

IL

Zip Code

60201-1141

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Tax Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00002006

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

112.72

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 210 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Andrea Dudding Le**

Mailing Address 3024 Park Pl

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Evanston | IL    | 60201-1141 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Tax Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001998

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Cheryl Uram Leamon**

Mailing Address 274 Hazel Ave

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Glencoe | IL    | 60022-1774 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir HR Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00001982

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Cheryl Uram Leamon**

Mailing Address 274 Hazel Ave

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Glencoe | IL    | 60022-1774 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir HR Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001999

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

80.00

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 PageFOR LINE NUMBER: PAGE 211 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Cheryl Uram Leamon**

Mailing Address 274 Hazel Ave

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Glencoe | IL    | 60022-1774 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir HR Communications

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 |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00001991**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Sue A Leboza**

Mailing Address PO Box 6930

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-6930 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, IT Infrastructure Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.14

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00000066**

Amount of Each Receipt this Period

77.78

Full Name (Last, First, Middle Initial)

**C. Sue A Leboza**

Mailing Address PO Box 6930

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-6930 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, IT Infrastructure Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.14

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00000067**

Amount of Each Receipt this Period

77.78

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

175.56

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 212 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Sue A Leboza**

Mailing Address PO Box 6930

City

Libertyville

State

IL

Zip Code

60048-6930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, IT Infrastructure Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.14

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000067

Amount of Each Receipt this Period

77.78

Full Name (Last, First, Middle Initial)

**B. Evelyn Mok Lee**

Mailing Address 8150 Kenneth Ave

City

Skokie

State

IL

Zip Code

60076-3206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Manager Talent Acquisition

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.11

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000766

Amount of Each Receipt this Period

36.17

Full Name (Last, First, Middle Initial)

**C. William Robert Lee**

Mailing Address 44 Carlyle Ln

City

Buffalo Grove

State

IL

Zip Code

60089-6696

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir, Internal Investigations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1194.54

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00002059

Amount of Each Receipt this Period

75.70

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

189.65

**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 PageFOR LINE NUMBER: PAGE 213 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. William Robert Lee**

Mailing Address 44 Carlyle Ln

City

Buffalo Grove

State

IL

Zip Code

60089-6696

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir, Internal Investigations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1194.54

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00002075**

Amount of Each Receipt this Period

148.34

Full Name (Last, First, Middle Initial)

**B. William Robert Lee**

Mailing Address 44 Carlyle Ln

City

Buffalo Grove

State

IL

Zip Code

60089-6696

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir, Internal Investigations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1194.54

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00002066**

Amount of Each Receipt this Period

84.78

Full Name (Last, First, Middle Initial)

**C. Carrie A Leinonen**

Mailing Address 3115 11th St

City

Winthrop Harbor

State

IL

Zip Code

60096-1407

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Mktg Communications

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00001666**

Amount of Each Receipt this Period

20.00

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

253.12

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 214 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Carrie A Leinonen**

Mailing Address 3115 11th St

City

Winthrop Harbor

State

IL

Zip Code

60096-1407

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Mktg Communications

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001681

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Carrie A Leinonen**

Mailing Address 3115 11th St

City

Winthrop Harbor

State

IL

Zip Code

60096-1407

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Mktg Communications

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001676

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Lara M Levitan**

Mailing Address 632 Warwick Rd

City

Deerfield

State

IL

Zip Code

60015-3131

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Legal, R&amp;D, Alliance Management &amp;

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000126

Amount of Each Receipt this Period

192.30

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

232.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 215 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Lara M Levitan**

Mailing Address 632 Warwick Rd

City

Deerfield

State

IL

Zip Code

60015-3131

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Legal, R&amp;D, Alliance Management &amp;

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000127

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**B. Lara M Levitan**

Mailing Address 632 Warwick Rd

City

Deerfield

State

IL

Zip Code

60015-3131

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Legal, R&amp;D, Alliance Management &amp;

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000127

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**C. Lance A Lhotka**

Mailing Address 25440 W Columbia Bay Dr

City

Lake Villa

State

IL

Zip Code

60046-9722

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP IT Manufacturing Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000188

Amount of Each Receipt this Period

40.00

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

424.60

**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 216 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lance A Lhotka

Mailing Address 25440 W Columbia Bay Dr

City State Zip Code  
 Lake Villa IL 60046-9722

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP IT Maunufacturing Operations

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  
 07 16 2015

Transaction ID : 7/16/2015 00000190

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Lance A Lhotka

Mailing Address 25440 W Columbia Bay Dr

City State Zip Code  
 Lake Villa IL 60046-9722

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP IT Maunufacturing Operations

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  
 07 30 2015

Transaction ID : 7/30/2015 00000189

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Mary P Lindsley

Mailing Address 315 Sarahrose Ct

City State Zip Code  
 Severna Park MD 21146-1913

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

837.03

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 07 02 2015

Transaction ID : 7/2/2015 00001336

Amount of Each Receipt this Period

56.57

SUBTOTAL of Receipts This Page (optional)..... ►

136.57

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 217 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Mary P Lindsley**

Mailing Address 315 Sarahrose Ct

City

Severna Park

State

MD

Zip Code

21146-1913

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

837.03

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00001346**

Amount of Each Receipt this Period

56.57

Full Name (Last, First, Middle Initial)

**B. Mary P Lindsley**

Mailing Address 315 Sarahrose Ct

City

Severna Park

State

MD

Zip Code

21146-1913

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

837.03

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00001345**

Amount of Each Receipt this Period

56.57

Full Name (Last, First, Middle Initial)

**C. Louis T. Lipinski**

Mailing Address 1012 N Goldengate Ln

City

Palatine

State

IL

Zip Code

60067-3424

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Franchise FP&amp;A

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.83

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00002056**

Amount of Each Receipt this Period

36.55

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

149.69

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 218 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Louis T. Lipinski**

Mailing Address 1012 N Goldengate Ln

City

Palatine

State

IL

Zip Code

60067-3424

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Franchise FP&amp;A

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

541.83

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

**Transaction ID : 7/16/2015 00002072**

Amount of Each Receipt this Period

36.55

Full Name (Last, First, Middle Initial)

**B. Louis T. Lipinski**

Mailing Address 1012 N Goldengate Ln

City

Palatine

State

IL

Zip Code

60067-3424

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Franchise FP&amp;A

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

541.83

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

**Transaction ID : 7/30/2015 00002063**

Amount of Each Receipt this Period

36.55

Full Name (Last, First, Middle Initial)

**C. Yemin Liu**

Mailing Address 5469 Parkside Ct

City

Gurnee

State

IL

Zip Code

60031-1798

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Scientist III Analyt Chem

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

566.19

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

**Transaction ID : 7/2/2015 00001735**

Amount of Each Receipt this Period

38.19

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

111.29

**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 PageFOR LINE NUMBER: PAGE 219 OF 402  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Yemin Liu**

Mailing Address 5469 Parkside Ct

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-1798 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Scientist III Analyst Chem

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.19

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

**Transaction ID : 7/16/2015 00001750**

Amount of Each Receipt this Period

38.19

Full Name (Last, First, Middle Initial)

**B. Yemin Liu**

Mailing Address 5469 Parkside Ct

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-1798 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Scientist III Analyst Chem

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.19

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

**Transaction ID : 7/30/2015 00001743**

Amount of Each Receipt this Period

38.19

Full Name (Last, First, Middle Initial)

**C. Vandra V Livingston-Tallis**Mailing Address 150 Hamakua Dr  
# 22

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Kailua | HI    | 96734-2825 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.87

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

**Transaction ID : 7/2/2015 00001519**

Amount of Each Receipt this Period

22.81

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

99.19

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 220 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Vandra V Livingston-Tallis**Mailing Address 150 Hamakua Dr  
# 22

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Kailua | HI    | 96734-2825 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.87

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001528

Amount of Each Receipt this Period

22.81

Full Name (Last, First, Middle Initial)

**B. Vandra V Livingston-Tallis**Mailing Address 150 Hamakua Dr  
# 22

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Kailua | HI    | 96734-2825 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.87

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001525

Amount of Each Receipt this Period

22.81

Full Name (Last, First, Middle Initial)

**C. Mark F Loula**

Mailing Address 255 Banbury Ln

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Grayslake | IL    | 60030-3416 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr App Technlgies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.26

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000481

Amount of Each Receipt this Period

48.04

SUBTOTAL of Receipts This Page (optional)..... ►

93.66

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 221 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Mark F Loula**

Mailing Address 255 Banbury Ln

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Grayslake | IL    | 60030-3416 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr App Technlgies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.26

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000487

Amount of Each Receipt this Period

48.04

Full Name (Last, First, Middle Initial)

**B. Mark F Loula**

Mailing Address 255 Banbury Ln

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Grayslake | IL    | 60030-3416 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr App Technlgies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

712.26

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000486

Amount of Each Receipt this Period

48.04

Full Name (Last, First, Middle Initial)

**C. Lois Ann Lourie**

Mailing Address 294 Maple Ave

|               |       |            |
|---------------|-------|------------|
| City          | State | Zip Code   |
| Highland Park | IL    | 60035-2012 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Health &amp; Welfare

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

986.06

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000289

Amount of Each Receipt this Period

106.58

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

202.66

**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 PageFOR LINE NUMBER: PAGE 222 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Lois Ann Lourie**

Mailing Address 294 Maple Ave

City

Highland Park

State

IL

Zip Code

60035-2012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Health &amp; Welfare

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

986.06

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00000293**

Amount of Each Receipt this Period

106.58

Full Name (Last, First, Middle Initial)

**B. Lois Ann Lourie**

Mailing Address 294 Maple Ave

City

Highland Park

State

IL

Zip Code

60035-2012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Health &amp; Welfare

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

986.06

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00000292**

Amount of Each Receipt this Period

106.58

Full Name (Last, First, Middle Initial)

**C. Heather A Lowe Becker**

Mailing Address 14595 S Somerset Cir

City

Libertyville

State

IL

Zip Code

60048-4883

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Bhr Commercial

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1932.45

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00000594**

Amount of Each Receipt this Period

131.33

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

344.49

**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 223 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Heather A Lowe Becker**

Mailing Address 14595 S Somerset Cir

City

Libertyville

State

IL

Zip Code

60048-4883

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Bhr Commercial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1932.45

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000603

Amount of Each Receipt this Period

131.33

Full Name (Last, First, Middle Initial)

**B. Heather A Lowe Becker**

Mailing Address 14595 S Somerset Cir

City

Libertyville

State

IL

Zip Code

60048-4883

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Bhr Commercial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1932.45

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000602

Amount of Each Receipt this Period

131.33

Full Name (Last, First, Middle Initial)

**C. Michelle Lucas**

Mailing Address 39 Jeff Dr

City

Coraopolis

State

PA

Zip Code

15108-3398

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.86

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00001635

Amount of Each Receipt this Period

20.40

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

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

283.06

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 224 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Michelle Lucas**

Mailing Address 39 Jeff Dr

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Coraopolis | PA    | 15108-3398 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.86

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001649

Amount of Each Receipt this Period

20.40

Full Name (Last, First, Middle Initial)

**B. Michelle Lucas**

Mailing Address 39 Jeff Dr

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Coraopolis | PA    | 15108-3398 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.86

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001645

Amount of Each Receipt this Period

20.40

Full Name (Last, First, Middle Initial)

**C. Lynette Lupia**

Mailing Address 9231 Springfield Ave

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Evanston | IL    | 60203-1517 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Outside Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00001630

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

60.80

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 225 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Lynette Lupia**

Mailing Address 9231 Springfield Ave

City

Evanston

State

IL

Zip Code

60203-1517

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Outside Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001643

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Lynette Lupia**

Mailing Address 9231 Springfield Ave

City

Evanston

State

IL

Zip Code

60203-1517

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Outside Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001639

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Eric A Lynch**

Mailing Address 568 Madison Ln

City

Lindenhurst

State

IL

Zip Code

60046-7891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

483.78

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00001495

Amount of Each Receipt this Period

32.60

SUBTOTAL of Receipts This Page (optional)..... ►

72.60

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 PageFOR LINE NUMBER: PAGE 226 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Eric A Lynch**

Mailing Address 568 Madison Ln

City

Lindenhurst

State

IL

Zip Code

60046-7891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

483.78

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00001504**

Amount of Each Receipt this Period

32.60

Full Name (Last, First, Middle Initial)

**B. Eric A Lynch**

Mailing Address 568 Madison Ln

City

Lindenhurst

State

IL

Zip Code

60046-7891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

483.78

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00001502**

Amount of Each Receipt this Period

32.60

Full Name (Last, First, Middle Initial)

**C. Kristin A Macmurray-Schmelter**

Mailing Address 805 Savanna Springs Dr

City

Lake Villa

State

IL

Zip Code

60046-6647

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Director, Planning Operations &amp;

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1034.91

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00000350**

Amount of Each Receipt this Period

70.15

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

135.35

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 227 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Kristin A Macmurray-Schmelter**

Mailing Address 805 Savanna Springs Dr

City

Lake Villa

State

IL

Zip Code

60046-6647

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Director, Planning Operations &amp;

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1034.91

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |      |
|---|---|---|---|---|---|---|---|---|---|---|---|---|------|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y    |
| 0 | 7 |   |   |   |   |   |   |   | 1 | 6 |   |   | 2015 |

Transaction ID : 7/16/2015 00000356

Amount of Each Receipt this Period

70.15

Full Name (Last, First, Middle Initial)

**B. Kristin A Macmurray-Schmelter**

Mailing Address 805 Savanna Springs Dr

City

Lake Villa

State

IL

Zip Code

60046-6647

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Director, Planning Operations &amp;

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1034.91

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |      |
|---|---|---|---|---|---|---|---|---|---|---|---|---|------|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y    |
| 0 | 7 |   |   |   |   |   |   |   |   | 3 | 0 |   | 2015 |

Transaction ID : 7/30/2015 00000355

Amount of Each Receipt this Period

70.15

Full Name (Last, First, Middle Initial)

**C. Janice L Mahnich**

Mailing Address 37112 N II Route 83

City

Lake Villa

State

IL

Zip Code

60046-9623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Finance Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.20

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |      |
|---|---|---|---|---|---|---|---|---|---|---|---|---|------|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y    |
| 0 | 7 |   |   |   |   |   |   |   |   | 0 | 2 |   | 2015 |

Transaction ID : 7/2/2015 00000079

Amount of Each Receipt this Period

34.48

SUBTOTAL of Receipts This Page (optional)..... ►

174.78

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 228 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Janice L Mahnich**

Mailing Address 37112 N II Route 83

City

Lake Villa

State

IL

Zip Code

60046-9623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Finance Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

511.20

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000081

Amount of Each Receipt this Period

34.48

Full Name (Last, First, Middle Initial)

**B. Janice L Mahnich**

Mailing Address 37112 N II Route 83

City

Lake Villa

State

IL

Zip Code

60046-9623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Finance Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

511.20

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000081

Amount of Each Receipt this Period

34.48

Full Name (Last, First, Middle Initial)

**C. Ramana Malladi**

Mailing Address 166 Brook Hill Ln

City

Vernon Hills

State

IL

Zip Code

60061-3142

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir CMC Project

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

809.31

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001787

Amount of Each Receipt this Period

54.59

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

123.55

**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 229 OF 402  
(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Ramana Malladi**

Mailing Address 166 Brook Hill Ln

City

Vernon Hills

State

IL

Zip Code

60061-3142

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir CMC Project

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

809.31

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00001804

Amount of Each Receipt this Period

54.59

Full Name (Last, First, Middle Initial)

## **B. Ramana Malladi**

Mailing Address 166 Brook Hill Ln

City

Vernon Hills

State

IL

Zip Code

60061-3142

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir CMC Project

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

809.31

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00001798

Amount of Each Receipt this Period

54.59

Full Name (Last, First, Middle Initial)

## **C. George B Mannion III**

Mailing Address 2750 Delaware Ln

City

Lindenhurst

State

IL

Zip Code

60046-4951

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000615

Amount of Each Receipt this Period

20.00

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

129.18

**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 PageFOR LINE NUMBER: PAGE 230 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. George B Mannion III**

Mailing Address 2750 Delaware Ln

City

Lindenhurst

State

IL

Zip Code

60046-4951

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00000625**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. George B Mannion III**

Mailing Address 2750 Delaware Ln

City

Lindenhurst

State

IL

Zip Code

60046-4951

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00000624**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. James A. Marsh**

Mailing Address 1149 W Monroe St

City

Chicago

State

IL

Zip Code

60607-2506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Commercial Development

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

651.87

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00000892**

Amount of Each Receipt this Period

43.97

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

83.97

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 231 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. James A. Marsh**

Mailing Address 1149 W Monroe St

City

Chicago

State

IL

Zip Code

60607-2506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Commercial Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.87

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000903

Amount of Each Receipt this Period

43.97

Full Name (Last, First, Middle Initial)

**B. James A. Marsh**

Mailing Address 1149 W Monroe St

City

Chicago

State

IL

Zip Code

60607-2506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Commercial Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.87

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000901

Amount of Each Receipt this Period

43.97

Full Name (Last, First, Middle Initial)

**C. Sara R Martens**

Mailing Address 120 Meadowlark Cir

City

Lindenhurst

State

IL

Zip Code

60046-7953

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Gbl EHS&amp;E Lab Services Head

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

645.84

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000547

Amount of Each Receipt this Period

43.48

SUBTOTAL of Receipts This Page (optional)..... ►

131.42

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: PAGE 232 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Sara R Martens**

Mailing Address 120 Meadowlark Cir

City

Lindenhurst

State

IL

Zip Code

60046-7953

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Gbl EHS&amp;E Lab Services Head

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

645.84

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000555

Amount of Each Receipt this Period

43.48

Full Name (Last, First, Middle Initial)

**B. Sara R Martens**

Mailing Address 120 Meadowlark Cir

City

Lindenhurst

State

IL

Zip Code

60046-7953

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Gbl EHS&amp;E Lab Services Head

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

645.84

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000554

Amount of Each Receipt this Period

43.48

Full Name (Last, First, Middle Initial)

**C. Jose Rafael Martinez Rivera**

Mailing Address PO Box 6230

City

Libertyville

State

IL

Zip Code

60048-6230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Regional Manufacturing

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

445.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000468

Amount of Each Receipt this Period

35.00

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

121.96

**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 233 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jose Rafael Martinez Rivera**

Mailing Address PO Box 6230

City

Libertyville

State

IL

Zip Code

60048-6230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Regional Manufacturing

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

445.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000474

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**B. Jose Rafael Martinez Rivera**

Mailing Address PO Box 6230

City

Libertyville

State

IL

Zip Code

60048-6230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Regional Manufacturing

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

445.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000473

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. Keith J Martino**

Mailing Address 1381 Elm Tree Rd

City

Lake Forest

State

IL

Zip Code

60045-1417

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

US, General Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1226.63

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000319

Amount of Each Receipt this Period

117.31

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

187.31

**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 234 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Keith J Martino**

Mailing Address 1381 Elm Tree Rd

City

Lake Forest

State

IL

Zip Code

60045-1417

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

US, General Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1226.63

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00000323**

Amount of Each Receipt this Period

117.31

Full Name (Last, First, Middle Initial)

**B. Keith J Martino**

Mailing Address 1381 Elm Tree Rd

City

Lake Forest

State

IL

Zip Code

60045-1417

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

US, General Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1226.63

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00000322**

Amount of Each Receipt this Period

117.31

Full Name (Last, First, Middle Initial)

**C. Margaret A Mathias**

Mailing Address 508 W Golf Rd

City

Libertyville

State

IL

Zip Code

60048-3516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Hq Bus Intel Sys

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

596.88

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00000130**

Amount of Each Receipt this Period

40.26

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

274.88

**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 235 OF 402

(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Margaret A Mathias**

Mailing Address 508 W Golf Rd

City

Libertyville

State

IL

Zip Code

60048-3516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Hq Bus Intel Sys

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.88

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015 00000131**

Amount of Each Receipt this Period

40.26

Full Name (Last, First, Middle Initial)

**B. Margaret A Mathias**

Mailing Address 508 W Golf Rd

City

Libertyville

State

IL

Zip Code

60048-3516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Hq Bus Intel Sys

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.88

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015 00000131**

Amount of Each Receipt this Period

40.26

Full Name (Last, First, Middle Initial)

**C. John H Matthews**

Mailing Address 6434 Renwick Cir

City

Tampa

State

FL

Zip Code

33647-1172

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.04

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015 00001014**

Amount of Each Receipt this Period

24.40

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

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

104.92

# **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 236 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. John H Matthews**

Mailing Address 6434 Renwick Cir

City State Zip Code  
Tampa FL 33647-1172

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.04

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00001025

Amount of Each Receipt this Period

24.40

Full Name (Last, First, Middle Initial)

**B. John H Matthews**

Mailing Address 6434 Renwick Cir

City State Zip Code  
Tampa FL 33647-1172

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.04

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00001023

Amount of Each Receipt this Period

24.40

Full Name (Last, First, Middle Initial)

**C. Greg A Mattson**

Mailing Address 827 Fair Way

City State Zip Code  
Libertyville IL 60048-1402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Controller Dev/Funct

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000503

Amount of Each Receipt this Period

20.00

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

68.80

**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 237 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Greg A Mattson**

Mailing Address 827 Fair Way

City

Libertyville

State

IL

Zip Code

60048-1402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Controller Dev/Funct

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  
07 / 16 / 2015

**Transaction ID : 7/16/2015 00000510**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **B. Greg A Mattson**

Mailing Address 827 Fair Way

City

Libertyville

State

IL

Zip Code

60048-1402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Controller Dev/Funct

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  
07 / 30 / 2015

**Transaction ID : 7/30/2015 00000509**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

## **C. Michael S McDonald**

Mailing Address 505 Old Dunstable Rd

City

Groton

State

MA

Zip Code

01450-1505

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Operations I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015 00000103**

Amount of Each Receipt this Period

73.09

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

113.09

**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 238 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Michael S McDonald**

Mailing Address 505 Old Dunstable Rd

City State Zip Code  
Groton MA 01450-1505

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Operations I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.36

Date of Receipt

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00000104

Amount of Each Receipt this Period

73.09

Full Name (Last, First, Middle Initial)

**B. Michael S McDonald**

Mailing Address 505 Old Dunstable Rd

City State Zip Code  
Groton MA 01450-1505

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Operations I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.36

Date of Receipt

M M / D D / Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000104

Amount of Each Receipt this Period

73.09

Full Name (Last, First, Middle Initial)

**C. Lucy McGill**

Mailing Address 216 Salt Grass Ct

City State Zip Code  
Ponte Vedra Beach FL 32082-4554

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00001808

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

161.18

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 PageFOR LINE NUMBER: PAGE 239 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Lucy McGill**

Mailing Address 216 Salt Grass Ct

City

Ponte Vedra Beach

State

FL

Zip Code

32082-4554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00001802**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Mark Denton McKee**Mailing Address 2842 N Burling St  
Apt 4

City

Chicago

State

IL

Zip Code

60657-6609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Group Medical Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

700.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 6 |   |   | 5 |

**Transaction ID : 7/16/2015 00001772**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Mark Denton McKee**Mailing Address 2842 N Burling St  
Apt 4

City

Chicago

State

IL

Zip Code

60657-6609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Group Medical Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

700.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00001765**

Amount of Each Receipt this Period

50.00

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

115.00

**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 PageFOR LINE NUMBER: PAGE 240 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Donna M McLean**Mailing Address 1115 S Plymouth Ct  
Apt 120

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60605-2027 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00001744

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Donna M McLean**Mailing Address 1115 S Plymouth Ct  
Apt 120

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60605-2027 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00001760

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Donna M McLean**Mailing Address 1115 S Plymouth Ct  
Apt 120

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60605-2027 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00001753

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 241 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Catherine Crisci Mecker**

Mailing Address 40 E 45th St

City

Indianapolis

State

IN

Zip Code

46205-1710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00001950

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Catherine Crisci Mecker**

Mailing Address 40 E 45th St

City

Indianapolis

State

IN

Zip Code

46205-1710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00001967

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Catherine Crisci Mecker**

Mailing Address 40 E 45th St

City

Indianapolis

State

IN

Zip Code

46205-1710

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00001960

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 PageFOR LINE NUMBER: PAGE 242 OF 402  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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"/>                | <input type="checkbox"/>     | <input type="checkbox"/>     | <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Viola M Meehan**

Mailing Address 20 Reliance Ln

City

Lincolnshire

State

IL

Zip Code

60069-3253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Controller R&amp;D &amp; Project Manageme

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1323.63

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015\_00000408**

Amount of Each Receipt this Period

111.63

Full Name (Last, First, Middle Initial)

**B. Viola M Meehan**

Mailing Address 20 Reliance Ln

City

Lincolnshire

State

IL

Zip Code

60069-3253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Controller R&amp;D &amp; Project Manageme

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1323.63

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015\_00000414**

Amount of Each Receipt this Period

111.63

Full Name (Last, First, Middle Initial)

**C. Viola M Meehan**

Mailing Address 20 Reliance Ln

City

Lincolnshire

State

IL

Zip Code

60069-3253

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Controller R&amp;D &amp; Project Manageme

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1323.63

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015\_00000413**

Amount of Each Receipt this Period

111.63

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

334.89

**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 243 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael E Meier**

Mailing Address 11921 W Hadley St

City

Wauwatosa

State

WI

Zip Code

53222-4021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Bus Sys Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.66

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00001703

Amount of Each Receipt this Period

32.28

Full Name (Last, First, Middle Initial)

**B. Michael E Meier**

Mailing Address 11921 W Hadley St

City

Wauwatosa

State

WI

Zip Code

53222-4021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Bus Sys Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.66

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00001719

Amount of Each Receipt this Period

32.28

Full Name (Last, First, Middle Initial)

**C. Michael E Meier**

Mailing Address 11921 W Hadley St

City

Wauwatosa

State

WI

Zip Code

53222-4021

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Bus Sys Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.66

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00001712

Amount of Each Receipt this Period

32.28

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

96.84

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 244 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Kene Eugene Mgbojikwe**

Mailing Address 8 Guilford St

City

Worcester

State

MA

Zip Code

01606-1080

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.10

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00001621

Amount of Each Receipt this Period

22.40

Full Name (Last, First, Middle Initial)

**B. Kene Eugene Mgbojikwe**

Mailing Address 8 Guilford St

City

Worcester

State

MA

Zip Code

01606-1080

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.10

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00001634

Amount of Each Receipt this Period

22.40

Full Name (Last, First, Middle Initial)

**C. Kene Eugene Mgbojikwe**

Mailing Address 8 Guilford St

City

Worcester

State

MA

Zip Code

01606-1080

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.10

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00001630

Amount of Each Receipt this Period

22.40

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

67.20

**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 245 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Beth G Miksa**

Mailing Address 28539 N Seminole Ct

City

Mundelein

State

IL

Zip Code

60060-5301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, HR Services

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00001739

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Beth G Miksa**

Mailing Address 28539 N Seminole Ct

City

Mundelein

State

IL

Zip Code

60060-5301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, HR Services

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00001754

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Beth G Miksa**

Mailing Address 28539 N Seminole Ct

City

Mundelein

State

IL

Zip Code

60060-5301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, HR Services

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00001747

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

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 246 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Bryan S Miller**

Mailing Address 6205 240th Ave

City  
SalemState  
WIZip Code  
53168-9686FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Analyst Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.66

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00000048

Amount of Each Receipt this Period

19.96

Full Name (Last, First, Middle Initial)

**B. Bryan S Miller**

Mailing Address 6205 240th Ave

City  
SalemState  
WIZip Code  
53168-9686FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Analyst Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.66

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00000048

Amount of Each Receipt this Period

19.96

Full Name (Last, First, Middle Initial)

**C. Bryan S Miller**

Mailing Address 6205 240th Ave

City  
SalemState  
WIZip Code  
53168-9686FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Analyst Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.66

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00000048

Amount of Each Receipt this Period

19.96

SUBTOTAL of Receipts This Page (optional)..... ►

59.88

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 247 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Christopher Miller**

Mailing Address 1685 Millburne Rd

City

Lake Forest

State

IL

Zip Code

60045-4105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Ip Strategy

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 |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00001931

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Christopher Miller**

Mailing Address 1685 Millburne Rd

City

Lake Forest

State

IL

Zip Code

60045-4105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Ip Strategy

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 |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00001947

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Christopher Miller**

Mailing Address 1685 Millburne Rd

City

Lake Forest

State

IL

Zip Code

60045-4105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Ip Strategy

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 |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00001940

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 248 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Martin G Moran**

Mailing Address 96 Winddance Dr

City

Lake Villa

State

IL

Zip Code

60046-6678

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Infrs &amp; Tm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.81

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000382

Amount of Each Receipt this Period

30.09

Full Name (Last, First, Middle Initial)

**B. Martin G Moran**

Mailing Address 96 Winddance Dr

City

Lake Villa

State

IL

Zip Code

60046-6678

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Infrs &amp; Tm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.81

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000388

Amount of Each Receipt this Period

30.09

Full Name (Last, First, Middle Initial)

**C. Martin G Moran**

Mailing Address 96 Winddance Dr

City

Lake Villa

State

IL

Zip Code

60046-6678

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Infrs &amp; Tm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.81

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000387

Amount of Each Receipt this Period

30.09

SUBTOTAL of Receipts This Page (optional)..... ►

90.27

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 249 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Reginald Morris**

Mailing Address 335 N Elmwood Ave

City

Waukegan

State

IL

Zip Code

60085-3567

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Spec IT Technical

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

431.55

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000731

Amount of Each Receipt this Period

29.11

Full Name (Last, First, Middle Initial)

**B. Reginald Morris**

Mailing Address 335 N Elmwood Ave

City

Waukegan

State

IL

Zip Code

60085-3567

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Spec IT Technical

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

431.55

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000741

Amount of Each Receipt this Period

29.11

Full Name (Last, First, Middle Initial)

**C. Reginald Morris**

Mailing Address 335 N Elmwood Ave

City

Waukegan

State

IL

Zip Code

60085-3567

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Spec IT Technical

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

431.55

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000740

Amount of Each Receipt this Period

29.11

SUBTOTAL of Receipts This Page (optional)..... ►

87.33

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 250 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Robert S Morris**

Mailing Address 311 Brainerd Ave

City

Libertyville

State

IL

Zip Code

60048-2105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Program Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000025

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Robert S Morris**

Mailing Address 311 Brainerd Ave

City

Libertyville

State

IL

Zip Code

60048-2105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Program Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000025

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Susan Em Moser**

Mailing Address 7370 Overland Park Ct

City

West Chester

State

OH

Zip Code

45069-5560

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000938

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

50.00

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 251 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Susan Em Moser**

Mailing Address 7370 Overland Park Ct

City

West Chester

State

OH

Zip Code

45069-5560

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000949

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Susan Em Moser**

Mailing Address 7370 Overland Park Ct

City

West Chester

State

OH

Zip Code

45069-5560

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000947

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Christine M Mueller**

Mailing Address 7519 Christopher Ridge Ct

City

Saint Louis

State

MO

Zip Code

63129-5831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00001315

Amount of Each Receipt this Period

15.00

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

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

55.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 252 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Christine M Mueller**

Mailing Address 7519 Christopher Ridge Ct

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Saint Louis | MO    | 63129-5831 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

**Transaction ID : 7/30/2015 00001314**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Stephen Munro**

Mailing Address 1122 Windemere Cir

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-5196 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

**Transaction ID : 7/2/2015 00000561**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Stephen Munro**

Mailing Address 1122 Windemere Cir

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-5196 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

**Transaction ID : 7/16/2015 00000570**

Amount of Each Receipt this Period

20.00

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

55.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 253 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Stephen Munro**

Mailing Address 1122 Windemere Cir

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-5196 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director I

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 |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000569

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Vijay K Murthy**Mailing Address 1500 Seaport Blvd  
Bldg H

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Redwood City | CA    | 94063-5540 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Ventures &amp; Early Stage Colla

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.43

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00002092

Amount of Each Receipt this Period

88.81

Full Name (Last, First, Middle Initial)

**C. Mark Robert Naidicz**

Mailing Address 8535 43rd Ave

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Kenosha | WI    | 53142-2422 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Business Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001062

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)..... ►

301.11

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 254 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Mark Robert Naidicz**

Mailing Address 8535 43rd Ave

City

Kenosha

State

WI

Zip Code

53142-2422

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Business Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001073

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**B. Mark Robert Naidicz**

Mailing Address 8535 43rd Ave

City

Kenosha

State

WI

Zip Code

53142-2422

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Business Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2884.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001071

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**C. Elsa Marie Navarro**

Mailing Address 1204 Gulfstream Pkwy

City

Libertyville

State

IL

Zip Code

60048-5203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.80

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00001958

Amount of Each Receipt this Period

41.52

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

426.12

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 255 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Elsa Marie Navarro**

Mailing Address 1204 Gulfstream Pkwy

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-5203 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.80

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001975

Amount of Each Receipt this Period

41.52

Full Name (Last, First, Middle Initial)

**B. Elsa Marie Navarro**

Mailing Address 1204 Gulfstream Pkwy

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-5203 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.80

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001968

Amount of Each Receipt this Period

41.52

Full Name (Last, First, Middle Initial)

**C. Elizabeth K Nelles**

Mailing Address 429 S Greenwood Ave

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Park Ridge | IL    | 60068-4567 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.82

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000592

Amount of Each Receipt this Period

54.02

SUBTOTAL of Receipts This Page (optional)..... ►

137.06

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 PageFOR LINE NUMBER: PAGE 256 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Elizabeth K Nelles**

Mailing Address 429 S Greenwood Ave

City

Park Ridge

State

IL

Zip Code

60068-4567

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

800.82

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00000601**

Amount of Each Receipt this Period

54.02

Full Name (Last, First, Middle Initial)

**B. Elizabeth K Nelles**

Mailing Address 429 S Greenwood Ave

City

Park Ridge

State

IL

Zip Code

60068-4567

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

800.82

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00000600**

Amount of Each Receipt this Period

54.02

Full Name (Last, First, Middle Initial)

**C. Eric J Nielsen**

Mailing Address 465 Lakeside Pl

City

Highland Park

State

IL

Zip Code

60035-5065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Technical Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00000773**

Amount of Each Receipt this Period

20.00

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

128.04

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 257 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Eric J Nielsen**

Mailing Address 465 Lakeside Pl

City

Highland Park

State

IL

Zip Code

60035-5065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Technical Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00000784**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Eric J Nielsen**

Mailing Address 465 Lakeside Pl

City

Highland Park

State

IL

Zip Code

60035-5065

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Technical Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00000783**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Angela M Nilius**

Mailing Address 4129 Kenwood Ave

City

Gurnee

State

IL

Zip Code

60031-2720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Dir I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

812.91

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00000507**

Amount of Each Receipt this Period

54.83

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

94.83

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 258 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Angela M Nilius**

Mailing Address 4129 Kenwood Ave

City

Gurnee

State

IL

Zip Code

60031-2720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Dir I

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

812.91

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

**Transaction ID : 7/16/2015 00000514**

Amount of Each Receipt this Period

54.83

Full Name (Last, First, Middle Initial)

**B. Angela M Nilius**

Mailing Address 4129 Kenwood Ave

City

Gurnee

State

IL

Zip Code

60031-2720

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Dir I

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

812.91

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

**Transaction ID : 7/30/2015 00000513**

Amount of Each Receipt this Period

54.83

Full Name (Last, First, Middle Initial)

**C. Keith A Nowakowski**

Mailing Address 3709 Sutton Woods Dr

City

Prairie Grove

State

IL

Zip Code

60012-1566

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Marketing Analytics

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

**Transaction ID : 7/2/2015 00000761**

Amount of Each Receipt this Period

25.00

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

134.66

**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 PageFOR LINE NUMBER: PAGE 259 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Keith A Nowakowski**

Mailing Address 3709 Sutton Woods Dr

|               |       |            |
|---------------|-------|------------|
| City          | State | Zip Code   |
| Prairie Grove | IL    | 60012-1566 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Marketing Analytics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    | / | 16    | / | 2015      |

Transaction ID : 7/16/2015 00000772

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Keith A Nowakowski**

Mailing Address 3709 Sutton Woods Dr

|               |       |            |
|---------------|-------|------------|
| City          | State | Zip Code   |
| Prairie Grove | IL    | 60012-1566 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Marketing Analytics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    | / | 30    | / | 2015      |

Transaction ID : 7/30/2015 00000771

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Maureen T O'Donnell**

Mailing Address 560 Canterbury Rd

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Bay Village | OH    | 44140-2410 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.60

Date of Receipt

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    | / | 02    | / | 2015      |

Transaction ID : 7/2/2015 00001840

Amount of Each Receipt this Period

31.24

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

81.24

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 260 OF 402  
 (check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Maureen T O'Donnell**

Mailing Address 560 Canterbury Rd

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Bay Village | OH    | 44140-2410 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.60

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001856

Amount of Each Receipt this Period

31.24

Full Name (Last, First, Middle Initial)

**B. Maureen T O'Donnell**

Mailing Address 560 Canterbury Rd

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Bay Village | OH    | 44140-2410 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Immunology Specialist IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.60

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001849

Amount of Each Receipt this Period

31.24

Full Name (Last, First, Middle Initial)

**C. Robert T O'Hagan**

Mailing Address 59 North Ave

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Mendon | MA    | 01756-1034 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir QA Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.55

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000121

Amount of Each Receipt this Period

44.89

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

107.37

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 PageFOR LINE NUMBER: PAGE 261 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Robert T O'Hagan**

Mailing Address 59 North Ave

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Mendon | MA    | 01756-1034 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir QA Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.55

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 1 | 6 | / | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00000122**

Amount of Each Receipt this Period

44.89

Full Name (Last, First, Middle Initial)

**B. Robert T O'Hagan**

Mailing Address 59 North Ave

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Mendon | MA    | 01756-1034 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir QA Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

665.55

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 3 | 0 | / | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00000122**

Amount of Each Receipt this Period

44.89

Full Name (Last, First, Middle Initial)

**C. Michael J O'Keefe**

Mailing Address 420 Capital Ln

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-4495 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Operations Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.40

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 | / | 0 | 2 | / | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00000662**

Amount of Each Receipt this Period

47.48

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

137.26

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 262 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Michael J O'Keefe**

Mailing Address 420 Capital Ln

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-4495 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Operations Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.40

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000671

Amount of Each Receipt this Period

47.48

Full Name (Last, First, Middle Initial)

**B. Michael J O'Keefe**

Mailing Address 420 Capital Ln

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-4495 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Operations Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.40

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000670

Amount of Each Receipt this Period

47.48

Full Name (Last, First, Middle Initial)

**C. Sherri L Oliver-Noe**

Mailing Address 646 Lexington Sq W

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-3233 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.91

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000801

Amount of Each Receipt this Period

50.59

SUBTOTAL of Receipts This Page (optional)..... ►

145.55

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 PageFOR LINE NUMBER: PAGE 263 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Sherri L Oliver-Noe**

Mailing Address 646 Lexington Sq W

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-3233 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.91

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000812

Amount of Each Receipt this Period

50.59

Full Name (Last, First, Middle Initial)

**B. Sherri L Oliver-Noe**

Mailing Address 646 Lexington Sq W

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-3233 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

752.91

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000811

Amount of Each Receipt this Period

50.59

Full Name (Last, First, Middle Initial)

**C. Eric Linden Olness**

Mailing Address 1720 Crosby Rd

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Wayzata | MN    | 55391-2107 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Mgr Immun Account Exec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.93

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00001266

Amount of Each Receipt this Period

36.69

SUBTOTAL of Receipts This Page (optional)..... ►

137.87

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 264 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Eric Linden Olness**

Mailing Address 1720 Crosby Rd

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Wayzata | MN    | 55391-2107 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Mgr Immun Account Exec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.93

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001279

Amount of Each Receipt this Period

36.69

Full Name (Last, First, Middle Initial)

**B. Eric Linden Olness**

Mailing Address 1720 Crosby Rd

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Wayzata | MN    | 55391-2107 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Mgr Immun Account Exec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.93

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001278

Amount of Each Receipt this Period

36.69

Full Name (Last, First, Middle Initial)

**C. Lisa M Olson**

Mailing Address 4 Circle Dr

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Hopkinton | MA    | 01748-1629 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Discovery Immunology&amp;Site Head, Ab

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

949.77

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00001518

Amount of Each Receipt this Period

64.31

SUBTOTAL of Receipts This Page (optional)..... ►

137.69

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: PAGE 265 OF 402  
(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Lisa M Olson**

Mailing Address 4 Circle Dr

City State Zip Code  
Hopkinton MA 01748-1629

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Discovery Immunology&Site Head, Ab

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

949.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015 00001527**

Amount of Each Receipt this Period

64.31

Full Name (Last, First, Middle Initial)

**B. Lisa M Olson**

Mailing Address 4 Circle Dr

City State Zip Code  
Hopkinton MA 01748-1629

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Discovery Immunology&Site Head, Ab

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

949.77

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015 00001524**

Amount of Each Receipt this Period

64.31

Full Name (Last, First, Middle Initial)

**C. James Stuart Parker**

Mailing Address 31119 Prairie Ridge Rd

City State Zip Code  
Libertyville IL 60048-4894

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, HR Operations Americas

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015 00000746**

Amount of Each Receipt this Period

33.62

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

162.24

**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 266 OF 402

(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. James Stuart Parker**

Mailing Address 31119 Prairie Ridge Rd

City State Zip Code  
Libertyville IL 60048-4894

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, HR Operations Americas

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015 00000756**

Amount of Each Receipt this Period

33.62

Full Name (Last, First, Middle Initial)

**B. James Stuart Parker**

Mailing Address 31119 Prairie Ridge Rd

City State Zip Code  
Libertyville IL 60048-4894

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, HR Operations Americas

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.72

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015 00000755**

Amount of Each Receipt this Period

33.62

Full Name (Last, First, Middle Initial)

**C. Bradford Jack Patrick**

Mailing Address 448 Sycamore St

City State Zip Code  
Vernon Hills IL 60061-1078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Division Counsel

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  
07 / 02 / 2015

**Transaction ID : 7/2/2015 00001894**

Amount of Each Receipt this Period

20.00

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

87.24

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 267 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Bradford Jack Patrick**

Mailing Address 448 Sycamore St

City

Vernon Hills

State

IL

Zip Code

60061-1078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Division Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001910

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Bradford Jack Patrick**

Mailing Address 448 Sycamore St

City

Vernon Hills

State

IL

Zip Code

60061-1078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Division Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001903

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Gregory R Pawell**

Mailing Address 2118 24th Ave

City

Kenosha

State

WI

Zip Code

53140-1736

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Dir Med Safety Eval

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000042

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 268 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Gregory R Pawell**

Mailing Address 2118 24th Ave

City

Kenosha

State

WI

Zip Code

53140-1736

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Dir Med Safety Eval

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000042

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Gregory R Pawell**

Mailing Address 2118 24th Ave

City

Kenosha

State

WI

Zip Code

53140-1736

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Dir Med Safety Eval

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000042

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Pamela M Pearson**

Mailing Address 50 Bedrock Ct

City

Saint Charles

State

MO

Zip Code

63304-8747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Virology Sales Specialist III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.30

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00001564

Amount of Each Receipt this Period

22.66

SUBTOTAL of Receipts This Page (optional)..... ►

62.66

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 PageFOR LINE NUMBER: PAGE 269 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Pamela M Pearson**

Mailing Address 50 Bedrock Ct

City

Saint Charles

State

MO

Zip Code

63304-8747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Virology Sales Specialist III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

336.30

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001576

Amount of Each Receipt this Period

22.66

Full Name (Last, First, Middle Initial)

**B. Pamela M Pearson**

Mailing Address 50 Bedrock Ct

City

Saint Charles

State

MO

Zip Code

63304-8747

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Virology Sales Specialist III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

336.30

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001572

Amount of Each Receipt this Period

22.66

Full Name (Last, First, Middle Initial)

**C. Lawrence J Peepo**

Mailing Address 294 Baltimore Dr

City

Vernon Hills

State

IL

Zip Code

60061-4506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Investor Relations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1124.24

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000235

Amount of Each Receipt this Period

75.00

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

120.32

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 270 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Lawrence J Peepo**

Mailing Address 294 Baltimore Dr

City

Vernon Hills

State

IL

Zip Code

60061-4506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Investor Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1124.24

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000237

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Lawrence J Peepo**

Mailing Address 294 Baltimore Dr

City

Vernon Hills

State

IL

Zip Code

60061-4506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Investor Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1124.24

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000236

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Lisa A S Peiser**

Mailing Address 744 Carriage Way

City

Deerfield

State

IL

Zip Code

60015-4539

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000466

Amount of Each Receipt this Period

30.00

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

180.00

**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 PageFOR LINE NUMBER: PAGE 271 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Lisa A S Peiser**

Mailing Address 744 Carriage Way

City

Deerfield

State

IL

Zip Code

60015-4539

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

**Transaction ID : 7/16/2015 00000472**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Lisa A S Peiser**

Mailing Address 744 Carriage Way

City

Deerfield

State

IL

Zip Code

60015-4539

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Director II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

**Transaction ID : 7/30/2015 00000471**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Deanna D Perinton**

Mailing Address 17925 Calle Central

City

Morgan Hill

State

CA

Zip Code

95037-3179

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

247.35

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

**Transaction ID : 7/2/2015 00001845**

Amount of Each Receipt this Period

16.49

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

76.49

**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 PageFOR LINE NUMBER: PAGE 272 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Deanna D Perkinton**

Mailing Address 17925 Calle Central

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Morgan Hill | CA    | 95037-3179 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.35

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

**Transaction ID : 7/16/2015 00001861**

Amount of Each Receipt this Period

16.49

Full Name (Last, First, Middle Initial)

**B. Deanna D Perkinton**

Mailing Address 17925 Calle Central

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Morgan Hill | CA    | 95037-3179 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

247.35

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

**Transaction ID : 7/30/2015 00001854**

Amount of Each Receipt this Period

16.49

Full Name (Last, First, Middle Initial)

**C. Rocco A Pesola**

Mailing Address 220 Knightsbridge Dr

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Mundelein | IL    | 60060-3243 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Knowledge Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.75

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

**Transaction ID : 7/2/2015 00000728**

Amount of Each Receipt this Period

22.51

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

55.49

**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 PageFOR LINE NUMBER: PAGE 273 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Rocco A Pesola**

Mailing Address 220 Knightsbridge Dr

City

Mundelein

State

IL

Zip Code

60060-3243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Knowledge Specialist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

333.75

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00000738**

Amount of Each Receipt this Period

22.51

Full Name (Last, First, Middle Initial)

**B. Rocco A Pesola**

Mailing Address 220 Knightsbridge Dr

City

Mundelein

State

IL

Zip Code

60060-3243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Knowledge Specialist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

333.75

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00000737**

Amount of Each Receipt this Period

22.51

Full Name (Last, First, Middle Initial)

**C. John Steven Peterson**

Mailing Address 4530 N Riverdale Dr

City

Johnsburg

State

IL

Zip Code

60051-8996

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mktg Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

490.47

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00002037**

Amount of Each Receipt this Period

33.05

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

78.07

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 274 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. John Steven Peterson**

Mailing Address 4530 N Riverdale Dr

City

Johnsburg

State

IL

Zip Code

60051-8996

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mktg Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.47

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00002054

Amount of Each Receipt this Period

33.05

Full Name (Last, First, Middle Initial)

**B. John Steven Peterson**

Mailing Address 4530 N Riverdale Dr

City

Johnsburg

State

IL

Zip Code

60051-8996

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mktg Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.47

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00002046

Amount of Each Receipt this Period

33.05

Full Name (Last, First, Middle Initial)

**C. Nina M Pinelli**

Mailing Address 1854 N Paulina St

City

Chicago

State

IL

Zip Code

60622-1106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Bhr Corporate Staff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1024.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000359

Amount of Each Receipt this Period

69.27

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

135.37

**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 PageFOR LINE NUMBER: PAGE 275 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Nina M Pinelli**

Mailing Address 1854 N Paulina St

City

Chicago

State

IL

Zip Code

60622-1106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Bhr Corporate Staff

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1024.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00000365**

Amount of Each Receipt this Period

69.27

Full Name (Last, First, Middle Initial)

**B. Nina M Pinelli**

Mailing Address 1854 N Paulina St

City

Chicago

State

IL

Zip Code

60622-1106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Bhr Corporate Staff

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1024.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00000364**

Amount of Each Receipt this Period

69.27

Full Name (Last, First, Middle Initial)

**C. Patrick Joseph Pink**

Mailing Address 210 Brampton Ln

City

Lake Forest

State

IL

Zip Code

60045-4700

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Marketing

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00000683**

Amount of Each Receipt this Period

15.00

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

153.54

**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 276 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Patrick Joseph Pink**

Mailing Address 210 Brampton Ln

City

Lake Forest

State

IL

Zip Code

60045-4700

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000682

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Tyler Pinney**

Mailing Address 7 Callison Ln

City

Voorhees

State

NJ

Zip Code

08043-4111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Acct Exc I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00001251

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Tyler Pinney**

Mailing Address 7 Callison Ln

City

Voorhees

State

NJ

Zip Code

08043-4111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Acct Exc I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00001250

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 PageFOR LINE NUMBER: PAGE 277 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Dean G Pontikes**

Mailing Address 1960 Burton Ln

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Park Ridge | IL    | 60068-1572 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Manager, Global Medical Communication

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.97

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00000593

Amount of Each Receipt this Period

23.27

Full Name (Last, First, Middle Initial)

**B. Dean G Pontikes**

Mailing Address 1960 Burton Ln

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Park Ridge | IL    | 60068-1572 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Manager, Global Medical Communication

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.97

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00000602

Amount of Each Receipt this Period

23.27

Full Name (Last, First, Middle Initial)

**C. Dean G Pontikes**

Mailing Address 1960 Burton Ln

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Park Ridge | IL    | 60068-1572 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Manager, Global Medical Communication

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.97

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00000601

Amount of Each Receipt this Period

23.27

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

69.81

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 278 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Kirsten Taylor Powell**

Mailing Address 4666 4th St S

City

Arlington

State

VA

Zip Code

22204-1321

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Government Affairs Federal P

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.45

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00002088

Amount of Each Receipt this Period

64.41

Full Name (Last, First, Middle Initial)

**B. Kirsten Taylor Powell**

Mailing Address 4666 4th St S

City

Arlington

State

VA

Zip Code

22204-1321

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Government Affairs Federal P

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.45

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00002105

Amount of Each Receipt this Period

64.41

Full Name (Last, First, Middle Initial)

**C. Kirsten Taylor Powell**

Mailing Address 4666 4th St S

City

Arlington

State

VA

Zip Code

22204-1321

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Government Affairs Federal P

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

960.45

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00002096

Amount of Each Receipt this Period

64.41

SUBTOTAL of Receipts This Page (optional)..... ►

193.23

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 279 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. William Preece Jr**

Mailing Address 1000 Brand Ln

City

Deerfield

State

IL

Zip Code

60015-3424

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Retirement Fun

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00000439**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. William Preece Jr**

Mailing Address 1000 Brand Ln

City

Deerfield

State

IL

Zip Code

60015-3424

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Retirement Fun

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00000444**

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. William Preece Jr**

Mailing Address 1000 Brand Ln

City

Deerfield

State

IL

Zip Code

60015-3424

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Retirement Fun

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00000443**

Amount of Each Receipt this Period

25.00

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

75.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 280 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Yu-Ming Pu**

Mailing Address 5507 Notting Hill Rd

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-1019 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Research Fellow

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00000071

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Yu-Ming Pu**

Mailing Address 5507 Notting Hill Rd

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-1019 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Research Fellow

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00000072

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Yu-Ming Pu**

Mailing Address 5507 Notting Hill Rd

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-1019 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Research Fellow

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00000072

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 PageFOR LINE NUMBER: PAGE 281 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Czeslaw H Radziejewski**

Mailing Address 3 Blossom Ct

City

Westborough

State

MA

Zip Code

01581-3679

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Associate Director I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001565

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Czeslaw H Radziejewski**

Mailing Address 3 Blossom Ct

City

Westborough

State

MA

Zip Code

01581-3679

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Associate Director I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001562

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Michelle A. Raine-Shepherd**

Mailing Address 1955 Quincy Ct

City

Gurnee

State

IL

Zip Code

60031-6097

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

IT Technical Specialist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

299.97

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00002077

Amount of Each Receipt this Period

20.25

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

50.25

**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 PageFOR LINE NUMBER: PAGE 282 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michelle A. Raine-Shepherd**

Mailing Address 1955 Quincy Ct

City

Gurnee

State

IL

Zip Code

60031-6097

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

IT Technical Specialist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

299.97

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

**Transaction ID : 7/16/2015 00002094**

Amount of Each Receipt this Period

20.25

Full Name (Last, First, Middle Initial)

**B. Michelle A. Raine-Shepherd**

Mailing Address 1955 Quincy Ct

City

Gurnee

State

IL

Zip Code

60031-6097

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

IT Technical Specialist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

299.97

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

**Transaction ID : 7/30/2015 00002085**

Amount of Each Receipt this Period

20.25

Full Name (Last, First, Middle Initial)

**C. Michael C Rancourt**

Mailing Address 185 Washington Cir

City

Lake Forest

State

IL

Zip Code

60045-2455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US COMM ANALYTI

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

867.57

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

**Transaction ID : 7/2/2015 00001441**

Amount of Each Receipt this Period

86.63

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

127.13

**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 PageFOR LINE NUMBER: PAGE 283 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael C Rancourt**

Mailing Address 185 Washington Cir

City

Lake Forest

State

IL

Zip Code

60045-2455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US COMM ANALYTI

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

867.57

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00001452**

Amount of Each Receipt this Period

86.63

Full Name (Last, First, Middle Initial)

**B. Michael C Rancourt**

Mailing Address 185 Washington Cir

City

Lake Forest

State

IL

Zip Code

60045-2455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US COMM ANALYTI

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

867.57

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00001450**

Amount of Each Receipt this Period

86.63

Full Name (Last, First, Middle Initial)

**C. Sowmyan Ranganathan**

Mailing Address 5651 Oakwood Cir

City

Long Grove

State

IL

Zip Code

60047-5053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Dir Legal Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

204.15

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00001996**

Amount of Each Receipt this Period

40.83

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

214.09

**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 PageFOR LINE NUMBER: PAGE 284 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Marguerite Keller Rapplean**

Mailing Address 727 Greenwood Ave

City

Mundelein

State

IL

Zip Code

60060-1915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Purchasing

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000227

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Marguerite Keller Rapplean**

Mailing Address 727 Greenwood Ave

City

Mundelein

State

IL

Zip Code

60060-1915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Purchasing

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000229

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Marguerite Keller Rapplean**

Mailing Address 727 Greenwood Ave

City

Mundelein

State

IL

Zip Code

60060-1915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Purchasing

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000228

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 285 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Martha A. Redd**

Mailing Address 19985 County Road 445

City

Lindale

State

TX

Zip Code

75771-3500

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Acct Exc I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.38

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00001693

Amount of Each Receipt this Period

21.94

Full Name (Last, First, Middle Initial)

**B. Martha A. Redd**

Mailing Address 19985 County Road 445

City

Lindale

State

TX

Zip Code

75771-3500

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Acct Exc I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.38

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00001709

Amount of Each Receipt this Period

21.94

Full Name (Last, First, Middle Initial)

**C. Martha A. Redd**

Mailing Address 19985 County Road 445

City

Lindale

State

TX

Zip Code

75771-3500

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Acct Exc I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.38

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00001702

Amount of Each Receipt this Period

21.94

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

65.82

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 286 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Scott Thomas Reents**

Mailing Address 37 Quail Drive

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Taxes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.40

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00001508

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**B. Scott Thomas Reents**

Mailing Address 37 Quail Drive

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Taxes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.40

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00001517

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**C. Scott Thomas Reents**

Mailing Address 37 Quail Drive

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Taxes

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.40

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00001514

Amount of Each Receipt this Period

192.30

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

576.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 287 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Marcell H Reid**

Mailing Address 315 Clarewood Cir

City

Grayslake

State

IL

Zip Code

60030-3468

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr Supplier Sustainability

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.43

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000456

Amount of Each Receipt this Period

66.76

Full Name (Last, First, Middle Initial)

**B. Marcell H Reid**

Mailing Address 315 Clarewood Cir

City

Grayslake

State

IL

Zip Code

60030-3468

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr Supplier Sustainability

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.43

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000462

Amount of Each Receipt this Period

66.76

Full Name (Last, First, Middle Initial)

**C. Marcell H Reid**

Mailing Address 315 Clarewood Cir

City

Grayslake

State

IL

Zip Code

60030-3468

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr Supplier Sustainability

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

842.43

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000461

Amount of Each Receipt this Period

66.76

SUBTOTAL of Receipts This Page (optional)..... ►

200.28

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 288 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Boris Renjifo**

Mailing Address 1749 NE Miami Ct  
Apt 602

City State Zip Code  
Miami FL 33132-1249

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Scientific Affrs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.39

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015\_00001916

Amount of Each Receipt this Period

45.89

Full Name (Last, First, Middle Initial)

**B. Boris Renjifo**

Mailing Address 1749 NE Miami Ct  
Apt 602

City State Zip Code  
Miami FL 33132-1249

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Scientific Affrs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.39

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015\_00001932

Amount of Each Receipt this Period

45.89

Full Name (Last, First, Middle Initial)

**C. Boris Renjifo**

Mailing Address 1749 NE Miami Ct  
Apt 602

City State Zip Code  
Miami FL 33132-1249

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Scientific Affrs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

678.39

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015\_00001925

Amount of Each Receipt this Period

45.89

SUBTOTAL of Receipts This Page (optional)..... ►

137.67

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 289 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Igor Reshetar**

Mailing Address 21947 W Tori Ln

City

Deer Park

State

IL

Zip Code

60010-7254

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Marketing Insights I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.12

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00001972

Amount of Each Receipt this Period

38.03

Full Name (Last, First, Middle Initial)

## **B. Igor Reshetar**

Mailing Address 21947 W Tori Ln

City

Deer Park

State

IL

Zip Code

60010-7254

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Marketing Insights I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.12

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00001989

Amount of Each Receipt this Period

38.03

Full Name (Last, First, Middle Initial)

## **C. Igor Reshetar**

Mailing Address 21947 W Tori Ln

City

Deer Park

State

IL

Zip Code

60010-7254

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Marketing Insights I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.12

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00001981

Amount of Each Receipt this Period

38.03

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

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

114.09

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 290 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Hayden A. Rhudy**Mailing Address 2133 W Rice St  
# 2

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60622-4834 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Therapeutic Area Strategies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.20

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00002027

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**B. Hayden A. Rhudy**Mailing Address 2133 W Rice St  
# 2

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60622-4834 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Therapeutic Area Strategies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.20

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00002044

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**C. Hayden A. Rhudy**Mailing Address 2133 W Rice St  
# 2

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60622-4834 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Therapeutic Area Strategies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.20

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00002036

Amount of Each Receipt this Period

192.30

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

576.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 291 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jillian Elsbeth Rice**Mailing Address 1815 N Sheffield Ave  
Apt D

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60614-8699 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir FD Aud TX Comp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00001921

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Jillian Elsbeth Rice**Mailing Address 1815 N Sheffield Ave  
Apt D

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60614-8699 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir FD Aud TX Comp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00001937

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Jillian Elsbeth Rice**Mailing Address 1815 N Sheffield Ave  
Apt D

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60614-8699 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir FD Aud TX Comp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00001930

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 292 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. John F Richardson**

Mailing Address 2732 P St NW

City

Washington

State

DC

Zip Code

20007-3064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Corporate Responsibility

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00000524

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. John F Richardson**

Mailing Address 2732 P St NW

City

Washington

State

DC

Zip Code

20007-3064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Corporate Responsibility

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00000531

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. John F Richardson**

Mailing Address 2732 P St NW

City

Washington

State

DC

Zip Code

20007-3064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Corporate Responsibility

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00000530

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 293 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Timothy J Richmond**

Mailing Address 567 Lexington Dr

City

Lake Forest

State

IL

Zip Code

60045-1562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Svp, Chief Human Resources Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.40

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00001559

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**B. Timothy J Richmond**

Mailing Address 567 Lexington Dr

City

Lake Forest

State

IL

Zip Code

60045-1562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Svp, Chief Human Resources Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.40

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00001571

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**C. Timothy J Richmond**

Mailing Address 567 Lexington Dr

City

Lake Forest

State

IL

Zip Code

60045-1562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Svp, Chief Human Resources Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.40

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00001567

Amount of Each Receipt this Period

192.30

**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: PAGE 294 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Katherine Rielly-Gauvin**

Mailing Address 939 Sherborne Ct

City

Libertyville

State

IL

Zip Code

60048-1223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Global Commercial Development

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

820.29

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015\_00001991

Amount of Each Receipt this Period

77.81

Full Name (Last, First, Middle Initial)

**B. Katherine Rielly-Gauvin**

Mailing Address 939 Sherborne Ct

City

Libertyville

State

IL

Zip Code

60048-1223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Global Commercial Development

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

820.29

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015\_00002007

Amount of Each Receipt this Period

77.81

Full Name (Last, First, Middle Initial)

**C. Katherine Rielly-Gauvin**

Mailing Address 939 Sherborne Ct

City

Libertyville

State

IL

Zip Code

60048-1223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Global Commercial Development

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

820.29

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015\_00001999

Amount of Each Receipt this Period

77.81

SUBTOTAL of Receipts This Page (optional)..... ►

233.43

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 PageFOR LINE NUMBER: PAGE 295 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Randy B Rimer**

Mailing Address 298 Warwick Pl

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Castle Pines | CO    | 80108-8823 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001334

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Randy B Rimer**

Mailing Address 298 Warwick Pl

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Castle Pines | CO    | 80108-8823 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001333

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Maria Del Carmen Rivas**

Mailing Address 915 McCormick Dr

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Lake Forest | IL    | 60045-3359 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Global Medical Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00001969

Amount of Each Receipt this Period

192.30

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

222.30

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: PAGE 296 OF 402  
(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Maria Del Carmen Rivas**

Mailing Address 915 McCormick Dr

City

Lake Forest

State

IL

Zip Code

60045-3359

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Global Medical Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2499.90

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00001986

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**B. Brady Anson Robbins**

Mailing Address 22 N Aberdeen St  
Apt 408

City

Chicago

State

IL

Zip Code

60607-3043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Mgr I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.33

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00001955

Amount of Each Receipt this Period

30.93

Full Name (Last, First, Middle Initial)

**C. Brady Anson Robbins**

Mailing Address 22 N Aberdeen St  
Apt 408

City

Chicago

State

IL

Zip Code

60607-3043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Mgr I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.33

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00001972

Amount of Each Receipt this Period

30.93

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

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

254.16



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

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

FOR LINE NUMBER: PAGE 297 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Brady Anson Robbins**

Mailing Address 22 N Aberdeen St  
Apt 408

City State Zip Code  
Chicago IL 60607-3043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Marketing Mgr I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.33

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00001965

Amount of Each Receipt this Period

30.93

Full Name (Last, First, Middle Initial)

**B. Glen Thomas Roberts**

Mailing Address 991 Commonwealth Ct

City State Zip Code  
Barrington IL 60010-3154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Dist &amp; Whse Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00000773

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Glen Thomas Roberts**

Mailing Address 991 Commonwealth Ct

City State Zip Code  
Barrington IL 60010-3154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Dist &amp; Whse Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000772

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional)..... ►

60.93

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 298 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael S Roberts**

Mailing Address 107 Warren Dr

City

Easley

State

SC

Zip Code

29640-8727

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep IV

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

388.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00001437**

Amount of Each Receipt this Period

25.90

Full Name (Last, First, Middle Initial)

**B. Michael S Roberts**

Mailing Address 107 Warren Dr

City

Easley

State

SC

Zip Code

29640-8727

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep IV

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

388.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00001448**

Amount of Each Receipt this Period

25.90

Full Name (Last, First, Middle Initial)

**C. Michael S Roberts**

Mailing Address 107 Warren Dr

City

Easley

State

SC

Zip Code

29640-8727

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep IV

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

388.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015\_00001446**

Amount of Each Receipt this Period

25.90

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

77.70

**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 299 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. William J Roberts**

Mailing Address 42 Pointe Rok Dr

City

Worcester

State

MA

Zip Code

01604-1464

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Section Manager MQA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.44

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00000282

Amount of Each Receipt this Period

36.38

Full Name (Last, First, Middle Initial)

**B. William J Roberts**

Mailing Address 42 Pointe Rok Dr

City

Worcester

State

MA

Zip Code

01604-1464

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Section Manager MQA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.44

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00000286

Amount of Each Receipt this Period

36.38

Full Name (Last, First, Middle Initial)

**C. William J Roberts**

Mailing Address 42 Pointe Rok Dr

City

Worcester

State

MA

Zip Code

01604-1464

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Section Manager MQA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.44

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00000285

Amount of Each Receipt this Period

36.38

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

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

109.14

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 300 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Angela G Robinson**Mailing Address 6520 Roswell Rd  
Unit 95

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Atlanta | GA    | 30328-3138 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Manager, MSL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015\_00001585

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Angela G Robinson**Mailing Address 6520 Roswell Rd  
Unit 95

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Atlanta | GA    | 30328-3138 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Manager, MSL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015\_00001598

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Angela G Robinson**Mailing Address 6520 Roswell Rd  
Unit 95

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Atlanta | GA    | 30328-3138 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Manager, MSL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015\_00001594

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

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

75.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 301 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Ronald O Robison**

Mailing Address 1851 S Matthew Ct

City

Libertyville

State

IL

Zip Code

60048-4860

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Vice President, Regulatory Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015\_00001849

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Ronald O Robison**

Mailing Address 1851 S Matthew Ct

City

Libertyville

State

IL

Zip Code

60048-4860

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Vice President, Regulatory Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015\_00001865

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Ronald O Robison**

Mailing Address 1851 S Matthew Ct

City

Libertyville

State

IL

Zip Code

60048-4860

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Vice President, Regulatory Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015\_00001858

Amount of Each Receipt this Period

20.00

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

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

60.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 302 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Richard A Rode**

Mailing Address 1202 Garfield Ave

City

Libertyville

State

IL

Zip Code

60048-3613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Research Fellow

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.41

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015\_00000727

Amount of Each Receipt this Period

36.91

Full Name (Last, First, Middle Initial)

**B. Richard A Rode**

Mailing Address 1202 Garfield Ave

City

Libertyville

State

IL

Zip Code

60048-3613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Research Fellow

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.41

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015\_00000737

Amount of Each Receipt this Period

36.91

Full Name (Last, First, Middle Initial)

**C. Richard A Rode**

Mailing Address 1202 Garfield Ave

City

Libertyville

State

IL

Zip Code

60048-3613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Research Fellow

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.41

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015\_00000736

Amount of Each Receipt this Period

36.91

SUBTOTAL of Receipts This Page (optional)..... ►

110.73

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 303 OF 402  
(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Christopher Michael Rodgers**

Mailing Address 1520 Gordon Ter

City

Deerfield

State

IL

Zip Code

60015-4700

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00001966

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Juan C Roman**

Mailing Address 1757 N Paulina St  
Apt L

City

Chicago

State

IL

Zip Code

60622-1156

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Dir Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.66

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00002058

Amount of Each Receipt this Period

48.16

Full Name (Last, First, Middle Initial)

**C. Juan C Roman**

Mailing Address 1757 N Paulina St  
Apt L

City

Chicago

State

IL

Zip Code

60622-1156

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Dir Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.66

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00002074

Amount of Each Receipt this Period

48.16

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

116.32

**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 304 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Juan C Roman**

Mailing Address 1757 N Paulina St  
Apt L

City State Zip Code  
Chicago IL 60622-1156

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Dir Mktg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.66

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015 00002065**

Amount of Each Receipt this Period

48.16

Full Name (Last, First, Middle Initial)

**B. Lisa H Ruiz**

Mailing Address 4008 Grand Ave

City State Zip Code  
McHenry IL 60050-4318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Dir La Area & Aff RA Strat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1379.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015 00000109**

Amount of Each Receipt this Period

93.06

Full Name (Last, First, Middle Initial)

**C. Lisa H Ruiz**

Mailing Address 4008 Grand Ave

City State Zip Code  
McHenry IL 60050-4318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Dir La Area & Aff RA Strat

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1379.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015 00000110**

Amount of Each Receipt this Period

93.06

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

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

234.28



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 305 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Lisa H Ruiz**

Mailing Address 4008 Grand Ave

City

McHenry

State

IL

Zip Code

60050-4318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Dir La Area &amp; Aff RA Strat

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1379.64

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00000110**

Amount of Each Receipt this Period

93.06

Full Name (Last, First, Middle Initial)

**B. James R Salanty**

Mailing Address 337 E Woodland Rd

City

Lake Bluff

State

IL

Zip Code

60044-2168

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US RHEUMATOLOGY

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1366.62

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00000170**

Amount of Each Receipt this Period

92.88

Full Name (Last, First, Middle Initial)

**C. James R Salanty**

Mailing Address 337 E Woodland Rd

City

Lake Bluff

State

IL

Zip Code

60044-2168

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US RHEUMATOLOGY

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1366.62

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 7 | 1 | 6 | 2 |   |   |

**Transaction ID : 7/16/2015 00000172**

Amount of Each Receipt this Period

92.88

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

278.82

**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 306 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. James R Salanty**

Mailing Address 337 E Woodland Rd

City State Zip Code  
 Lake Bluff IL 60044-2168

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US RHEUMATOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1366.62

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2015

Transaction ID : 7/30/2015 00000172

Amount of Each Receipt this Period

92.88

Full Name (Last, First, Middle Initial)

**B. Azita Saleki-Gerhardt**

Mailing Address 14155 Mettawa Woods Dr

City State Zip Code  
 Mettawa IL 60045-1013

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Svp, Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 02 / 2015

Transaction ID : 7/2/2015 00000144

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**C. Azita Saleki-Gerhardt**

Mailing Address 14155 Mettawa Woods Dr

City State Zip Code  
 Mettawa IL 60045-1013

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Svp, Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.40

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2015

Transaction ID : 7/16/2015 00000146

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)..... ►

477.48

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 307 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Azita Saleki-Gerhardt**

Mailing Address 14155 Mettawa Woods Dr

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Mettawa | IL    | 60045-1013 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Svp, Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.40

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00000146**

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**B. Jochen G Salfeld**

Mailing Address 177 Old Westboro Rd

|               |       |            |
|---------------|-------|------------|
| City          | State | Zip Code   |
| North Grafton | MA    | 01536-2013 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Discovery Biologics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2323.14

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00000213**

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**C. Jochen G Salfeld**

Mailing Address 177 Old Westboro Rd

|               |       |            |
|---------------|-------|------------|
| City          | State | Zip Code   |
| North Grafton | MA    | 01536-2013 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Discovery Biologics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2323.14

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00000215**

Amount of Each Receipt this Period

192.30

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

576.90

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 308 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Jochen G Salfeld**

Mailing Address 177 Old Westboro Rd

City

North Grafton

State

MA

Zip Code

01536-2013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Discovery Biologics

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2323.14

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000214

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**B. Juan Sanchez**

Mailing Address 636 Tilipi Ln

City

Schaumburg

State

IL

Zip Code

60193-1441

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

IT Systems Administrator Ediscovery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.03

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00002076

Amount of Each Receipt this Period

35.31

Full Name (Last, First, Middle Initial)

**C. Juan Sanchez**

Mailing Address 636 Tilipi Ln

City

Schaumburg

State

IL

Zip Code

60193-1441

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

IT Systems Administrator Ediscovery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.03

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00002093

Amount of Each Receipt this Period

35.31

SUBTOTAL of Receipts This Page (optional)..... ►

262.92

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 309 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Juan Sanchez**

Mailing Address 636 Tilipi Ln

City

Schaumburg

State

IL

Zip Code

60193-1441

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

IT Systems Administrator Ediscovery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.03

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00002084

Amount of Each Receipt this Period

35.31

Full Name (Last, First, Middle Initial)

**B. Andrew J. Sandusky**

Mailing Address 604 E Winding Hill Rd

City

Mechanicsburg

State

PA

Zip Code

17055-4992

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie

Occupation

Regional Director, State Government Af

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.97

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00002093

Amount of Each Receipt this Period

43.27

Full Name (Last, First, Middle Initial)

**C. Andrew J. Sandusky**

Mailing Address 604 E Winding Hill Rd

City

Mechanicsburg

State

PA

Zip Code

17055-4992

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie

Occupation

Regional Director, State Government Af

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.97

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00002110

Amount of Each Receipt this Period

43.27

SUBTOTAL of Receipts This Page (optional)..... ►

121.85

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 310 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Andrew J. Sandusky**

Mailing Address 604 E Winding Hill Rd

City

Mechanicsburg

State

PA

Zip Code

17055-4992

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie

Occupation

Regional Director, State Government Af

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.97

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00002101

Amount of Each Receipt this Period

43.27

Full Name (Last, First, Middle Initial)

**B. Jon Santamauro**

Mailing Address 3310 Beechtree Ln

City

Falls Church

State

VA

Zip Code

22042-4004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, International Government

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1186.62

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001947

Amount of Each Receipt this Period

80.04

Full Name (Last, First, Middle Initial)

**C. Jon Santamauro**

Mailing Address 3310 Beechtree Ln

City

Falls Church

State

VA

Zip Code

22042-4004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, International Government

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1186.62

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001964

Amount of Each Receipt this Period

80.04

SUBTOTAL of Receipts This Page (optional)..... ►

203.35

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 PageFOR LINE NUMBER: PAGE 311 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jon Santamauro**

Mailing Address 3310 Beechtree Ln

City

Falls Church

State

VA

Zip Code

22042-4004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, International Government

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1186.62

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00001957**

Amount of Each Receipt this Period

80.04

Full Name (Last, First, Middle Initial)

**B. Christopher L. Sardi**

Mailing Address 919 Greenwood Ave

City

Deerfield

State

IL

Zip Code

60015-3023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Controller FP&amp;A

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

460.60

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00000315**

Amount of Each Receipt this Period

65.80

Full Name (Last, First, Middle Initial)

**c. Christopher L. Sardi**

Mailing Address 919 Greenwood Ave

City

Deerfield

State

IL

Zip Code

60015-3023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Controller FP&amp;A

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

460.60

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00000319**

Amount of Each Receipt this Period

65.80

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

211.64

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 312 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Christopher L. Sardi**

Mailing Address 919 Greenwood Ave

City

Deerfield

State

IL

Zip Code

60015-3023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Controller FP&amp;A

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

460.60

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000318

Amount of Each Receipt this Period

65.80

Full Name (Last, First, Middle Initial)

**B. Stephen F. Scango**

Mailing Address 3824 Mount Olney Ln

City

Olney

State

MD

Zip Code

20832-1122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie

Occupation

Director, Federal Government Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

463.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00002094

Amount of Each Receipt this Period

66.15

Full Name (Last, First, Middle Initial)

**C. Stephen F. Scango**

Mailing Address 3824 Mount Olney Ln

City

Olney

State

MD

Zip Code

20832-1122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie

Occupation

Director, Federal Government Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

463.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00002111

Amount of Each Receipt this Period

66.15

SUBTOTAL of Receipts This Page (optional)..... ►

198.10

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 PageFOR LINE NUMBER: PAGE 313 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Stephen F. Scango**

Mailing Address 3824 Mount Olney Ln

City  
OlneyState  
MDZip Code  
20832-1122FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie

Occupation

Director, Federal Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00002102**

Amount of Each Receipt this Period

66.15

Full Name (Last, First, Middle Initial)

**B. Maria J Schall**

Mailing Address 5705 West Ave

City

Edinboro

State

PA

Zip Code

16412-1342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.53

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00000884**

Amount of Each Receipt this Period

18.03

Full Name (Last, First, Middle Initial)

**C. Maria J Schall**

Mailing Address 5705 West Ave

City

Edinboro

State

PA

Zip Code

16412-1342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.53

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00000895**

Amount of Each Receipt this Period

18.03

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

102.21

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 314 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Maria J Schall**

Mailing Address 5705 West Ave

City

Edinboro

State

PA

Zip Code

16412-1342

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep IV

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

265.53

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000893

Amount of Each Receipt this Period

18.03

Full Name (Last, First, Middle Initial)

**B. Kathleen Marie Sheil Scheidt**

Mailing Address 1513 Asbury Ave

City

Evanston

State

IL

Zip Code

60201-4110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Securities, Benefits &amp; Legal Oper

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001919

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Kathleen Marie Sheil Scheidt**

Mailing Address 1513 Asbury Ave

City

Evanston

State

IL

Zip Code

60201-4110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Securities, Benefits &amp; Legal Oper

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 | 6 | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001935

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

98.03

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 315 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Kathleen Marie Sheil Scheidt**

Mailing Address 1513 Asbury Ave

City

Evanston

State

IL

Zip Code

60201-4110

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Securities, Benefits &amp; Legal Oper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001928

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Wesley Wendel Schmidt**

Mailing Address 4603 W Xavier Dr

City

Franklin

State

WI

Zip Code

53132-9067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Quality Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000805

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Wesley Wendel Schmidt**

Mailing Address 4603 W Xavier Dr

City

Franklin

State

WI

Zip Code

53132-9067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Quality Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000816

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

80.00

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 PageFOR LINE NUMBER: PAGE 316 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Wesley Wendel Schmidt**

Mailing Address 4603 W Xavier Dr

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Franklin | WI    | 53132-9067 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Quality Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000815

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. John R Schoenfelder**

Mailing Address 849 Blackberry Ct

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-5112 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Statistical Research

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.12

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00001669

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. John R Schoenfelder**

Mailing Address 849 Blackberry Ct

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-5112 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Statistical Research

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.12

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001684

Amount of Each Receipt this Period

50.00

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

120.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 317 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. John R Schoenfelder**

Mailing Address 849 Blackberry Ct

City

Gurnee

State

IL

Zip Code

60031-5112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Statistical Research

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

744.12

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001679

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Timothy L Schuetter**

Mailing Address 14491 W Juniper Ct

City

Wadsworth

State

IL

Zip Code

60083-9444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Div Sys QA

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000183

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Timothy L Schuetter**

Mailing Address 14491 W Juniper Ct

City

Wadsworth

State

IL

Zip Code

60083-9444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Div Sys QA

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 6 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000185

Amount of Each Receipt this Period

20.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 318 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Timothy L Schuetter**

Mailing Address 14491 W Juniper Ct

City

Wadsworth

State

IL

Zip Code

60083-9444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Div Sys QA

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 |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000184

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Laura J Schumacher**

Mailing Address 701 E Center Ave

City

Lake Bluff

State

IL

Zip Code

60044-2607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Evp, Bus Dev, Ext Aff &amp; Gn Csl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000208

Amount of Each Receipt this Period

368.46

Full Name (Last, First, Middle Initial)

**C. Laura J Schumacher**

Mailing Address 701 E Center Ave

City

Lake Bluff

State

IL

Zip Code

60044-2607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Evp, Bus Dev, Ext Aff &amp; Gn Csl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000210

Amount of Each Receipt this Period

368.46

SUBTOTAL of Receipts This Page (optional)..... ►

756.92

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 319 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Laura J Schumacher**

Mailing Address 701 E Center Ave

City

Lake Bluff

State

IL

Zip Code

60044-2607

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Evp, Bus Dev, Ext Aff &amp; Gn Csl

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |

Transaction ID : 7/30/2015 00000209

Amount of Each Receipt this Period

263.87

Full Name (Last, First, Middle Initial)

**B. Margaret M Schwab**

Mailing Address 6720 Nantucket Ct

City

Gurnee

State

IL

Zip Code

60031-4014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Tech Ops

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1105.38

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |

Transaction ID : 7/2/2015 00000753

Amount of Each Receipt this Period

74.56

Full Name (Last, First, Middle Initial)

**C. Margaret M Schwab**

Mailing Address 6720 Nantucket Ct

City

Gurnee

State

IL

Zip Code

60031-4014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Tech Ops

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1105.38

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |

Transaction ID : 7/16/2015 00000764

Amount of Each Receipt this Period

74.56

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

412.99

**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 PageFOR LINE NUMBER: PAGE 320 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Margaret M Schwab**

Mailing Address 6720 Nantucket Ct

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-4014 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Tech Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1105.38

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

**Transaction ID : 7/30/2015 00000763**

Amount of Each Receipt this Period

74.56

Full Name (Last, First, Middle Initial)

**B. David C Scofield**

Mailing Address 42 Spring Dr

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Johnston | RI    | 02919-3031 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Production Supv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.63

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

**Transaction ID : 7/2/2015 00000185**

Amount of Each Receipt this Period

19.27

Full Name (Last, First, Middle Initial)

**C. David C Scofield**

Mailing Address 42 Spring Dr

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Johnston | RI    | 02919-3031 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Production Supv

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.63

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

**Transaction ID : 7/16/2015 00000187**

Amount of Each Receipt this Period

19.27

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

113.10

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 321 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. David C Scofield**

Mailing Address 42 Spring Dr

City

Johnston

State

RI

Zip Code

02919-3031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Production Supv

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

285.63

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00000186**

Amount of Each Receipt this Period

19.27

Full Name (Last, First, Middle Initial)

**B. James Michael Scott**

Mailing Address 1305 Blackberry Ct

City

Libertyville

State

IL

Zip Code

60048-5318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Comm Dev'T

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

721.65

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 2 |   | 7 | 2 | 0 | 1 | 5 |   |

**Transaction ID : 7/2/2015 00001572**

Amount of Each Receipt this Period

48.77

Full Name (Last, First, Middle Initial)

**C. James Michael Scott**

Mailing Address 1305 Blackberry Ct

City

Libertyville

State

IL

Zip Code

60048-5318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Comm Dev'T

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

721.65

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 7 | 1 | 6 | 2 | 0 | 1 |

**Transaction ID : 7/16/2015 00001585**

Amount of Each Receipt this Period

48.77

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

116.81

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 322 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. James Michael Scott**

Mailing Address 1305 Blackberry Ct

City

Libertyville

State

IL

Zip Code

60048-5318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Comm Dev'T

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

721.65

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001581

Amount of Each Receipt this Period

48.77

Full Name (Last, First, Middle Initial)

**B. Henry W Sewing II**

Mailing Address 7903 Gillette St

City

Lenexa

State

KS

Zip Code

66215-2514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Uro/Gyn Specialist III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00001133

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Henry W Sewing II**

Mailing Address 7903 Gillette St

City

Lenexa

State

KS

Zip Code

66215-2514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Uro/Gyn Specialist III

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 1 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001145

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

98.77

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 323 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Henry W Sewing II**

Mailing Address 7903 Gillette St

City

Lenexa

State

KS

Zip Code

66215-2514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Uro/Gyn Specialist III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001143

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Antoine C Shaw**

Mailing Address 828 Waterford Cut

City

Crystal Lake

State

IL

Zip Code

60014-8506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Sales Trng Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.82

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00001261

Amount of Each Receipt this Period

47.26

Full Name (Last, First, Middle Initial)

**C. Antoine C Shaw**

Mailing Address 828 Waterford Cut

City

Crystal Lake

State

IL

Zip Code

60014-8506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Sales Trng Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

692.82

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001274

Amount of Each Receipt this Period

47.26

SUBTOTAL of Receipts This Page (optional)..... ►

119.52

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 324 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Antoine C Shaw**

Mailing Address 828 Waterford Cut

City

Crystal Lake

State

IL

Zip Code

60014-8506

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Sales Trng Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

692.82

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001273

Amount of Each Receipt this Period

47.26

Full Name (Last, First, Middle Initial)

**B. Terri June Shelton**

Mailing Address 247 City Park Rd

City

Westmoreland

State

TN

Zip Code

37186-4820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Site Clin Res Associate

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

314.88

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001977

Amount of Each Receipt this Period

21.32

Full Name (Last, First, Middle Initial)

**C. Terri June Shelton**

Mailing Address 247 City Park Rd

City

Westmoreland

State

TN

Zip Code

37186-4820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Site Clin Res Associate

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

314.88

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001994

Amount of Each Receipt this Period

21.32

SUBTOTAL of Receipts This Page (optional)..... ►

89.90

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 325 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Terri June Shelton**

Mailing Address 247 City Park Rd

City

Westmoreland

State

TN

Zip Code

37186-4820

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Site Clin Res Associate

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

314.88

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001986

Amount of Each Receipt this Period

21.32

Full Name (Last, First, Middle Initial)

**B. Perry C Siatis**

Mailing Address 4203 Ridgeland Ln

City

Northbrook

State

IL

Zip Code

60062-4936

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Biotherapeutics &amp; Legal, Commercia

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2692.20

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001475

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**C. Perry C Siatis**

Mailing Address 4203 Ridgeland Ln

City

Northbrook

State

IL

Zip Code

60062-4936

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Biotherapeutics &amp; Legal, Commercia

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2692.20

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001485

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)..... ►

405.92

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 326 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Perry C Siatis**

Mailing Address 4203 Ridgeland Ln

City

Northbrook

State

IL

Zip Code

60062-4936

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Biotherapeutics & Legal, Commercia

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2692.20

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00001483

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

## **B. Jonathan J Silver**

Mailing Address 2037 Illinois Rd

City

Northbrook

State

IL

Zip Code

60062-5232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Marketing Insights

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000803

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

## **C. Jonathan J Silver**

Mailing Address 2037 Illinois Rd

City

Northbrook

State

IL

Zip Code

60062-5232

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Marketing Insights

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000802

Amount of Each Receipt this Period

15.00

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

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

222.30

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 327 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. John Terrence Simmons**

Mailing Address 1013 Windhaven Rd

City

Libertyville

State

IL

Zip Code

60048-3800

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Purchasing And Supplier Management

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 |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000114

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. John Terrence Simmons**

Mailing Address 1013 Windhaven Rd

City

Libertyville

State

IL

Zip Code

60048-3800

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Purchasing And Supplier Management

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 |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000115

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. John Terrence Simmons**

Mailing Address 1013 Windhaven Rd

City

Libertyville

State

IL

Zip Code

60048-3800

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Purchasing And Supplier Management

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 |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000115

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 328 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Joseph E Simon**

Mailing Address 1994 Ravine Dr

City

Gurnee

State

IL

Zip Code

60031-6359

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP EH &amp; S

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1474.08

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015\_00000266

Amount of Each Receipt this Period

100.18

Full Name (Last, First, Middle Initial)

**B. Joseph E Simon**

Mailing Address 1994 Ravine Dr

City

Gurnee

State

IL

Zip Code

60031-6359

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP EH &amp; S

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1474.08

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015\_00000270

Amount of Each Receipt this Period

100.18

Full Name (Last, First, Middle Initial)

**c. Joseph E Simon**

Mailing Address 1994 Ravine Dr

City

Gurnee

State

IL

Zip Code

60031-6359

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP EH &amp; S

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1474.08

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015\_00000269

Amount of Each Receipt this Period

100.18

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

300.54

**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 329 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Mark Simpson**

Mailing Address 3212 Cobblestone Dr

City State Zip Code  
Santa Rosa CA 95404-1738

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000947

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

## **B. Mark Simpson**

Mailing Address 3212 Cobblestone Dr

City State Zip Code  
Santa Rosa CA 95404-1738

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000945

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

## **C. Lewis Henry Sita**

Mailing Address 21234 W Creekside Dr

City State Zip Code  
Kildeer IL 60047-7861

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1303.08

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000198

Amount of Each Receipt this Period

97.16

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

127.16

**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 330 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Lewis Henry Sita**

Mailing Address 21234 W Creekside Dr

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Kildeer | IL    | 60047-7861 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1303.08

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000200

Amount of Each Receipt this Period

97.16

Full Name (Last, First, Middle Initial)

**B. Lewis Henry Sita**

Mailing Address 21234 W Creekside Dr

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Kildeer | IL    | 60047-7861 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1303.08

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000199

Amount of Each Receipt this Period

97.16

Full Name (Last, First, Middle Initial)

**C. Debra A Skarda**

Mailing Address 8444 63rd Ave

|                  |       |            |
|------------------|-------|------------|
| City             | State | Zip Code   |
| Pleasant Prairie | WI    | 53158-5915 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Dir Reg Affairs

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 |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000478

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

214.32

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 331 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Debra A Skarda**

Mailing Address 8444 63rd Ave

City

Pleasant Prairie

State

WI

Zip Code

53158-5915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Dir Reg Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00000484**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Debra A Skarda**

Mailing Address 8444 63rd Ave

City

Pleasant Prairie

State

WI

Zip Code

53158-5915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Dir Reg Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00000483**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. John W Skoug**

Mailing Address 251 Cater Ln

City

Libertyville

State

IL

Zip Code

60048-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Pharm Sci Dev

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00001522**

Amount of Each Receipt this Period

25.00

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

65.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 332 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. John W Skoug**

Mailing Address 251 Cater Ln

City

Libertyville

State

IL

Zip Code

60048-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Pharm Sci Dev

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001531

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. John W Skoug**

Mailing Address 251 Cater Ln

City

Libertyville

State

IL

Zip Code

60048-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Pharm Sci Dev

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001528

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Janice Michelle Small**

Mailing Address 6046 Woodland Dr

City

Dallas

State

TX

Zip Code

75225-2833

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

IMMUNOLOGY SPECIALIST IV

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

326.73

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000900

Amount of Each Receipt this Period

21.99

SUBTOTAL of Receipts This Page (optional)..... ►

71.99

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 333 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Janice Michelle Small**

Mailing Address 6046 Woodland Dr

City  
DallasState  
TXZip Code  
75225-2833FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

IMMUNOLOGY SPECIALIST IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.73

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000911

Amount of Each Receipt this Period

21.99

Full Name (Last, First, Middle Initial)

**B. Janice Michelle Small**

Mailing Address 6046 Woodland Dr

City  
DallasState  
TXZip Code  
75225-2833FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

IMMUNOLOGY SPECIALIST IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

326.73

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000909

Amount of Each Receipt this Period

21.99

Full Name (Last, First, Middle Initial)

**C. Jennifer L Smith**

Mailing Address 34739 N Linden Ave

City  
GrayslakeState  
ILZip Code  
60030-1112FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Bhr - US Commercial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1455.75

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000021

Amount of Each Receipt this Period

98.75

SUBTOTAL of Receipts This Page (optional)..... ►

142.73

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 PageFOR LINE NUMBER: PAGE 334 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Jennifer L Smith**

Mailing Address 34739 N Linden Ave

City

Grayslake

State

IL

Zip Code

60030-1112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Bhr - US Commercial

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1455.75

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00000021**

Amount of Each Receipt this Period

98.75

Full Name (Last, First, Middle Initial)

**B. Jennifer L Smith**

Mailing Address 34739 N Linden Ave

City

Grayslake

State

IL

Zip Code

60030-1112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Bhr - US Commercial

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1455.75

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00000021**

Amount of Each Receipt this Period

98.75

Full Name (Last, First, Middle Initial)

**C. Katherine C. Smith**Mailing Address 4111 S Four Mile Run Dr  
Unit 201

City

Arlington

State

VA

Zip Code

22204-3904

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Manager, Federal Government Affair

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

818.94

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00002048**

Amount of Each Receipt this Period

55.86

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

253.36

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 335 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Katherine C. Smith**Mailing Address 4111 S Four Mile Run Dr  
Unit 201

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Arlington | VA    | 22204-3904 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Manager, Federal Government Affair

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

818.94

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00002065

Amount of Each Receipt this Period

55.86

Full Name (Last, First, Middle Initial)

**B. Katherine C. Smith**Mailing Address 4111 S Four Mile Run Dr  
Unit 201

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Arlington | VA    | 22204-3904 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Manager, Federal Government Affair

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

818.94

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00002056

Amount of Each Receipt this Period

55.86

Full Name (Last, First, Middle Initial)

**C. Laura A Smith**

Mailing Address 321 S Chester Ave

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Park Ridge | IL    | 60068-3944 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir TA Corporate And Americas

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1001.07

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00001523

Amount of Each Receipt this Period

67.65

SUBTOTAL of Receipts This Page (optional)..... ►

179.37

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 PageFOR LINE NUMBER: PAGE 336 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Laura A Smith**

Mailing Address 321 S Chester Ave

City

Park Ridge

State

IL

Zip Code

60068-3944

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir TA Corporate And Americas

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1001.07

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001533

Amount of Each Receipt this Period

67.65

Full Name (Last, First, Middle Initial)

**B. Laura A Smith**

Mailing Address 321 S Chester Ave

City

Park Ridge

State

IL

Zip Code

60068-3944

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir TA Corporate And Americas

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1001.07

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001530

Amount of Each Receipt this Period

67.65

Full Name (Last, First, Middle Initial)

**C. Shawn C Smith**

Mailing Address 850 Ballater Dr

City

Delaware

State

OH

Zip Code

43015-7218

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001808

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

160.30

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 PageFOR LINE NUMBER: PAGE 337 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Shawn C Smith**

Mailing Address 850 Ballater Dr

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Delaware | OH    | 43015-7218 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001825

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Shawn C Smith**

Mailing Address 850 Ballater Dr

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Delaware | OH    | 43015-7218 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001818

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Thad E Smith**

Mailing Address 262 S Seymour Ave

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Grayslake | IL    | 60030-2353 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Prof Education &amp; Patient Acce

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

843.45

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000291

Amount of Each Receipt this Period

80.78

SUBTOTAL of Receipts This Page (optional)..... ►

130.78

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 338 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Thad E Smith**

Mailing Address 262 S Seymour Ave

City

Grayslake

State

IL

Zip Code

60030-2353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Prof Education &amp; Patient Acce

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

843.45

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000295

Amount of Each Receipt this Period

80.78

Full Name (Last, First, Middle Initial)

**B. Thad E Smith**

Mailing Address 262 S Seymour Ave

City

Grayslake

State

IL

Zip Code

60030-2353

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Prof Education &amp; Patient Acce

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

843.45

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000294

Amount of Each Receipt this Period

80.78

Full Name (Last, First, Middle Initial)

**C. Jay P Sokolovsky**

Mailing Address 350 Robincrest Ln

City

Lindenhurst

State

IL

Zip Code

60046-9528

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Infra Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.30

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000655

Amount of Each Receipt this Period

28.24

SUBTOTAL of Receipts This Page (optional)..... ►

189.80

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 339 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Jay P Sokolovsky**

Mailing Address 350 Robincrest Ln

City

Lindenhurst

State

IL

Zip Code

60046-9528

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Infra Architect

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

420.30

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000664

Amount of Each Receipt this Period

28.24

Full Name (Last, First, Middle Initial)

**B. Jay P Sokolovsky**

Mailing Address 350 Robincrest Ln

City

Lindenhurst

State

IL

Zip Code

60046-9528

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Infra Architect

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

420.30

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000663

Amount of Each Receipt this Period

28.24

Full Name (Last, First, Middle Initial)

**C. Deborah E Solbrig**

Mailing Address 697 Federal Pkwy

City

Lindenhurst

State

IL

Zip Code

60046-7838

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sales Training Mgr

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

489.27

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000889

Amount of Each Receipt this Period

32.97

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

89.45

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 340 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Deborah E Solbrig**

Mailing Address 697 Federal Pkwy

City

Lindenhurst

State

IL

Zip Code

60046-7838

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sales Training Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.27

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000900

Amount of Each Receipt this Period

32.97

Full Name (Last, First, Middle Initial)

**B. Deborah E Solbrig**

Mailing Address 697 Federal Pkwy

City

Lindenhurst

State

IL

Zip Code

60046-7838

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sales Training Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.27

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000898

Amount of Each Receipt this Period

32.97

Full Name (Last, First, Middle Initial)

**C. Elaine Kazacoff Sorg**

Mailing Address 29027 N Brassie Ct

City

Mundelein

State

IL

Zip Code

60060-5312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US IMMUNOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001954

Amount of Each Receipt this Period

25.00

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

90.94

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 341 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Elaine Kazacoff Sorg**

Mailing Address 29027 N Brassie Ct

City

Mundelein

State

IL

Zip Code

60060-5312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US IMMUNOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001971

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B. Elaine Kazacoff Sorg**

Mailing Address 29027 N Brassie Ct

City

Mundelein

State

IL

Zip Code

60060-5312

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US IMMUNOLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001964

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C. Thomas T Spalding**

Mailing Address 4737 Wellington Dr

City

Long Grove

State

IL

Zip Code

60047-5223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Oncology GCD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00002026

Amount of Each Receipt this Period

65.75

SUBTOTAL of Receipts This Page (optional)..... ►

115.75

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 342 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Thomas T Spalding**

Mailing Address 4737 Wellington Dr

City

Long Grove

State

IL

Zip Code

60047-5223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Oncology GCD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00002043

Amount of Each Receipt this Period

65.75

Full Name (Last, First, Middle Initial)

**B. Thomas T Spalding**

Mailing Address 4737 Wellington Dr

City

Long Grove

State

IL

Zip Code

60047-5223

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP Oncology GCD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

526.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00002035

Amount of Each Receipt this Period

65.75

Full Name (Last, First, Middle Initial)

**c. Michael B Spengler**

Mailing Address 3290 Mini Dr

City

Wadsworth

State

IL

Zip Code

60083-9464

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Business HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000589

Amount of Each Receipt this Period

20.00

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

151.50

**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 343 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael B Spengler**

Mailing Address 3290 Mini Dr

City

Wadsworth

State

IL

Zip Code

60083-9464

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Business HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000598

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Michael B Spengler**

Mailing Address 3290 Mini Dr

City

Wadsworth

State

IL

Zip Code

60083-9464

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Business HR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000597

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Stephen V Squires**

Mailing Address 11812 334th Ave

City

Twin Lakes

State

WI

Zip Code

53181-9141

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.57

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000201

Amount of Each Receipt this Period

23.69

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

63.69

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 344 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Stephen V Squires**

Mailing Address 11812 334th Ave

City

Twin Lakes

State

WI

Zip Code

53181-9141

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Engineer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

351.57

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000203

Amount of Each Receipt this Period

23.69

Full Name (Last, First, Middle Initial)

**B. Stephen V Squires**

Mailing Address 11812 334th Ave

City

Twin Lakes

State

WI

Zip Code

53181-9141

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Engineer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

351.57

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000202

Amount of Each Receipt this Period

23.69

Full Name (Last, First, Middle Initial)

**C. Michael C Staff**

Mailing Address 12 Oak Ave

City

Grayslake

State

IL

Zip Code

60030-2333

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

US, General Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1369.86

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000930

Amount of Each Receipt this Period

93.10

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

140.48

**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 345 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Michael C Staff**

Mailing Address 12 Oak Ave

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Grayslake | IL    | 60030-2333 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

US, General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1369.86

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000941

Amount of Each Receipt this Period

93.10

Full Name (Last, First, Middle Initial)

**B. Michael C Staff**

Mailing Address 12 Oak Ave

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Grayslake | IL    | 60030-2333 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

US, General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1369.86

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000939

Amount of Each Receipt this Period

93.10

Full Name (Last, First, Middle Initial)

**C. Markham Theodore Stahl**

Mailing Address 24957 W Nicklaus Way

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Antioch | IL    | 60002-2315 |

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Vice President, Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1484.19

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000452

Amount of Each Receipt this Period

100.00

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

286.20

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 346 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Markham Theodore Stahl**

Mailing Address 24957 W Nicklaus Way

City State Zip Code  
Antioch IL 60002-2315

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Vice President, Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1484.19

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00000458

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Markham Theodore Stahl**

Mailing Address 24957 W Nicklaus Way

City State Zip Code  
Antioch IL 60002-2315

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Vice President, Information Technology

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1484.19

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000457

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Cherie A Stanford**

Mailing Address 1879 Apple Valley Dr

City State Zip Code  
Wauconda IL 60084-1420

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Global QA/RA Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.49

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00000609

Amount of Each Receipt this Period

70.99

SUBTOTAL of Receipts This Page (optional)..... ►

270.99

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 PageFOR LINE NUMBER: PAGE 347 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Cherie A Stanford**

Mailing Address 1879 Apple Valley Dr

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Wauconda | IL    | 60084-1420 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Global QA/RA Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.49

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  | / | 16  | / | 2015    |

Transaction ID : 7/16/2015 00000618

Amount of Each Receipt this Period

70.99

Full Name (Last, First, Middle Initial)

**B. Cherie A Stanford**

Mailing Address 1879 Apple Valley Dr

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Wauconda | IL    | 60084-1420 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Global QA/RA Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1052.49

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  | / | 30  | / | 2015    |

Transaction ID : 7/30/2015 00000617

Amount of Each Receipt this Period

70.99

Full Name (Last, First, Middle Initial)

**C. Daniel E. Stanton**

Mailing Address 4 Avalon Way

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Grafton | MA    | 01519-1577 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Business Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 07  | / | 02  | / | 2015    |

Transaction ID : 7/2/2015 00001697

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

161.98

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 348 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Daniel E. Stanton**

Mailing Address 4 Avalon Way

City State Zip Code  
Grafton MA 01519-1577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Business Systems

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  
07 / 16 / 2015

**Transaction ID : 7/16/2015 00001713**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Daniel E. Stanton**

Mailing Address 4 Avalon Way

City State Zip Code  
Grafton MA 01519-1577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Business Systems

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  
07 / 30 / 2015

**Transaction ID : 7/30/2015 00001706**

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Gregory W Steele**

Mailing Address 499 Long Hill Rd

City State Zip Code  
Gurnee IL 60031-5006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sect Head Legal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

973.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015 00000110**

Amount of Each Receipt this Period

81.97

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

121.97

**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 PageFOR LINE NUMBER: PAGE 349 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Gregory W Steele**

Mailing Address 499 Long Hill Rd

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-5006 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sect Head Legal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

973.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000111

Amount of Each Receipt this Period

81.97

Full Name (Last, First, Middle Initial)

**B. Gregory W Steele**

Mailing Address 499 Long Hill Rd

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Gurnee | IL    | 60031-5006 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sect Head Legal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

973.05

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000111

Amount of Each Receipt this Period

81.97

Full Name (Last, First, Middle Initial)

**C. Christine R Stegman**

Mailing Address 719 Stonegate Rd

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-1855 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Ambassador/Adv Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1575.60

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001178

Amount of Each Receipt this Period

106.68

SUBTOTAL of Receipts This Page (optional)..... ►

270.62

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 350 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Christine R Stegman**

Mailing Address 719 Stonegate Rd

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-1855 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Ambassador/Adv Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1575.60

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001190

Amount of Each Receipt this Period

106.68

Full Name (Last, First, Middle Initial)

**B. Christine R Stegman**

Mailing Address 719 Stonegate Rd

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-1855 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Ambassador/Adv Lead

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1575.60

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001188

Amount of Each Receipt this Period

106.68

Full Name (Last, First, Middle Initial)

**C. Mark R Stenhouse**

Mailing Address 1192 Oak Knoll Dr

|             |       |            |
|-------------|-------|------------|
| City        | State | Zip Code   |
| Lake Forest | IL    | 60045-3648 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US GASTROENTEROLOGY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1693.44

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00001251

Amount of Each Receipt this Period

114.66

SUBTOTAL of Receipts This Page (optional)..... ►

328.02

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 351 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Mark R Stenhouse**

Mailing Address 1192 Oak Knoll Dr

City

Lake Forest

State

IL

Zip Code

60045-3648

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US GASTROENTEROLOGY

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1693.44

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00001264

Amount of Each Receipt this Period

114.66

Full Name (Last, First, Middle Initial)

**B. Mark R Stenhouse**

Mailing Address 1192 Oak Knoll Dr

City

Lake Forest

State

IL

Zip Code

60045-3648

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US GASTROENTEROLOGY

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1693.44

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001263

Amount of Each Receipt this Period

114.66

Full Name (Last, First, Middle Initial)

**C. Mark Allen Stoffel**

Mailing Address 922 N Stark Dr

City

Palatine

State

IL

Zip Code

60074-3731

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Controller Manu Ops

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

669.81

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000355

Amount of Each Receipt this Period

45.35

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

274.67

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 352 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Mark Allen Stoffel**

Mailing Address 922 N Stark Dr

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Palatine | IL    | 60074-3731 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Controller Manu Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

669.81

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000361

Amount of Each Receipt this Period

45.35

Full Name (Last, First, Middle Initial)

**B. Mark Allen Stoffel**

Mailing Address 922 N Stark Dr

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Palatine | IL    | 60074-3731 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Controller Manu Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

669.81

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000360

Amount of Each Receipt this Period

45.35

Full Name (Last, First, Middle Initial)

**C. James C Stolzenbach**

Mailing Address 278 Stanton Dr

|               |       |            |
|---------------|-------|------------|
| City          | State | Zip Code   |
| Buffalo Grove | IL    | 60089-6841 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Early Immunology Renal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2068.98

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000305

Amount of Each Receipt this Period

139.56

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

230.26

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 353 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. James C Stolzenbach**

Mailing Address 278 Stanton Dr

City

Buffalo Grove

State

IL

Zip Code

60089-6841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Early Immunology Renal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2068.98

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000309

Amount of Each Receipt this Period

139.56

Full Name (Last, First, Middle Initial)

**B. James C Stolzenbach**

Mailing Address 278 Stanton Dr

City

Buffalo Grove

State

IL

Zip Code

60089-6841

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Early Immunology Renal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2068.98

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000308

Amount of Each Receipt this Period

139.56

Full Name (Last, First, Middle Initial)

**C. Heather Lynn Strawn**

Mailing Address 4833 1st St S

City

Arlington

State

VA

Zip Code

22204-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Federal Government Affai

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1213.38

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00002031

Amount of Each Receipt this Period

82.00

SUBTOTAL of Receipts This Page (optional)..... ►

361.12

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: PAGE 354 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Heather Lynn Strawn**

Mailing Address 4833 1st St S

City

Arlington

State

VA

Zip Code

22204-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Federal Government Affai

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1213.38

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2015

Transaction ID : 7/16/2015 00002048

Amount of Each Receipt this Period

82.00

Full Name (Last, First, Middle Initial)

**B. Heather Lynn Strawn**

Mailing Address 4833 1st St S

City

Arlington

State

VA

Zip Code

22204-1315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Federal Government Affai

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1213.38

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 07 / 30 / 2015

Transaction ID : 7/30/2015 00002040

Amount of Each Receipt this Period

82.00

Full Name (Last, First, Middle Initial)

**C. James P Sullivan**

Mailing Address 711 Dimmeydale Dr

City

Deerfield

State

IL

Zip Code

60015-2325

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Vice President Discovery

Receipt For:

☐  
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2641.08

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 07 / 02 / 2015

Transaction ID : 7/2/2015 00000015

Amount of Each Receipt this Period

192.30

SUBTOTAL of Receipts This Page (optional)..... ►

356.30

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 355 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. James P Sullivan**

Mailing Address 711 Dimmeydale Dr

City

Deerfield

State

IL

Zip Code

60015-2325

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Vice President Discovery

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2641.08

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000015

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**B. James P Sullivan**

Mailing Address 711 Dimmeydale Dr

City

Deerfield

State

IL

Zip Code

60015-2325

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Vice President Discovery

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2641.08

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000015

Amount of Each Receipt this Period

192.30

Full Name (Last, First, Middle Initial)

**C. Marianne R Sutcliffe**

Mailing Address 4210 N Salem Dr

City

Arlington Heights

State

IL

Zip Code

60004-7901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US ENDOCRINOLOGY

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1269.41

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000676

Amount of Each Receipt this Period

111.31

SUBTOTAL of Receipts This Page (optional)..... ►

495.91

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 PageFOR LINE NUMBER: PAGE 356 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Marianne R Sutcliffe**

Mailing Address 4210 N Salem Dr

City

Arlington Heights

State

IL

Zip Code

60004-7901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US ENDOCRINOLOGY

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1269.41

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000685

Amount of Each Receipt this Period

111.31

Full Name (Last, First, Middle Initial)

**B. Marianne R Sutcliffe**

Mailing Address 4210 N Salem Dr

City

Arlington Heights

State

IL

Zip Code

60004-7901

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, US ENDOCRINOLOGY

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1269.41

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000684

Amount of Each Receipt this Period

111.31

Full Name (Last, First, Middle Initial)

**C. Robert V Talanian**

Mailing Address 33 Candleberry Ln

City

Harvard

State

MA

Zip Code

01451-1641

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Discovery

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000622

Amount of Each Receipt this Period

20.00

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

242.62

**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 357 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Robert V Talanian**

Mailing Address 33 Candleberry Ln

City

Harvard

State

MA

Zip Code

01451-1641

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Discovery

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000621

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Samir Tari**

Mailing Address 237 Shadow Creek Cir

City

Vernon Hills

State

IL

Zip Code

60061-4568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Dir Medical

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00002039

Amount of Each Receipt this Period

40.02

Full Name (Last, First, Middle Initial)

**C. Samir Tari**

Mailing Address 237 Shadow Creek Cir

City

Vernon Hills

State

IL

Zip Code

60061-4568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Dir Medical

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00002056

Amount of Each Receipt this Period

40.02

SUBTOTAL of Receipts This Page (optional)..... ►

100.04

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:  
(check only one)

PAGE 358 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Samir Tari**

Mailing Address 237 Shadow Creek Cir

City

Vernon Hills

State

IL

Zip Code

60061-4568

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Dir Medical

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.56

Date of Receipt

MM / DD / YYYY  
07 / 30 / 2015

Transaction ID : 7/30/2015 00002048

Amount of Each Receipt this Period

40.02

Full Name (Last, First, Middle Initial)

**B. Jeannine Tayeh**

Mailing Address 209 Kedzie St  
Apt 1A

City

Evanston

State

IL

Zip Code

60202-2430

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Leaves & Eap Programs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.93

Date of Receipt

MM / DD / YYYY  
07 / 02 / 2015

Transaction ID : 7/2/2015 00001924

Amount of Each Receipt this Period

31.73

Full Name (Last, First, Middle Initial)

**C. Jeannine Tayeh**

Mailing Address 209 Kedzie St  
Apt 1A

City

Evanston

State

IL

Zip Code

60202-2430

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Leaves & Eap Programs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.93

Date of Receipt

MM / DD / YYYY  
07 / 16 / 2015

Transaction ID : 7/16/2015 00001940

Amount of Each Receipt this Period

31.73

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

103.48

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 359 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Jeannine Tayeh**Mailing Address 209 Kedzie St  
Apt 1A

City Evanston State IL Zip Code 60202-2430

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Mgr Leaves &amp; Eap Programs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.93

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00001933

Amount of Each Receipt this Period

31.73

Full Name (Last, First, Middle Initial)

**B. Timothy R Teater**Mailing Address 120 Woodlake Blvd  
Apt 2601

City Gurnee State IL Zip Code 60031-6706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Systems Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.05

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00000119

Amount of Each Receipt this Period

17.87

Full Name (Last, First, Middle Initial)

**C. Timothy R Teater**Mailing Address 120 Woodlake Blvd  
Apt 2601

City Gurnee State IL Zip Code 60031-6706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Systems Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.05

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00000120

Amount of Each Receipt this Period

17.87

SUBTOTAL of Receipts This Page (optional)..... ►

67.47

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 360 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Timothy R Teater**

Mailing Address 120 Woodlake Blvd  
Apt 2601

City State Zip Code  
Gurnee IL 60031-6706

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Systems Admin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.05

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000120

Amount of Each Receipt this Period

17.87

Full Name (Last, First, Middle Initial)

## **B. Michael James Thomas**

Mailing Address 1175 Museum Blvd  
Unit 610

City State Zip Code  
Vernon Hills IL 60061-3160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Total Rewards

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1301.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00001976

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. Michael James Thomas**

Mailing Address 1175 Museum Blvd  
Unit 610

City State Zip Code  
Vernon Hills IL 60061-3160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Total Rewards

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1301.94

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00001993

Amount of Each Receipt this Period

100.00

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

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

217.87



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

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

FOR LINE NUMBER: PAGE 361 OF 402

(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Michael James Thomas**

Mailing Address 1175 Museum Blvd  
Unit 610

City State Zip Code  
Vernon Hills IL 60061-3160

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Total Rewards

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1301.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 30 2015

Transaction ID : 7/30/2015 00001985

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Mark J Thompson**

Mailing Address 482 Wicks St

City State Zip Code  
Grayslake IL 60030-2757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

IT Sr Program Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 02 2015

Transaction ID : 7/2/2015 00000638

Amount of Each Receipt this Period

47.89

Full Name (Last, First, Middle Initial)

**C. Mark J Thompson**

Mailing Address 482 Wicks St

City State Zip Code  
Grayslake IL 60030-2757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

IT Sr Program Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.23

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 16 2015

Transaction ID : 7/16/2015 00000648

Amount of Each Receipt this Period

47.89

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

195.78

**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 362 OF 402  
(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Mark J Thompson**

Mailing Address 482 Wicks St

City  
Grayslake

State  
IL

Zip Code  
60030-2757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

IT Sr Program Mgr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.23

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015 00000647**

Amount of Each Receipt this Period

47.89

Full Name (Last, First, Middle Initial)

**B. Elizabeth Boozer Tomasin**

Mailing Address 11361 Kensington Rd

City  
Los Alamitos

State  
CA

Zip Code  
90720-3801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.30

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015 00001820**

Amount of Each Receipt this Period

17.82

Full Name (Last, First, Middle Initial)

**C. Elizabeth Boozer Tomasin**

Mailing Address 11361 Kensington Rd

City  
Los Alamitos

State  
CA

Zip Code  
90720-3801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.30

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015 00001837**

Amount of Each Receipt this Period

17.82

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

83.53

**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 363 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Elizabeth Boozer Tomasin**

Mailing Address 11361 Kensington Rd

City

Los Alamitos

State

CA

Zip Code

90720-3801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep IV

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00001830

Amount of Each Receipt this Period

17.82

Full Name (Last, First, Middle Initial)

**B. Philip A Tongue**

Mailing Address 22 Millwood Dr

City

Shrewsbury

State

MA

Zip Code

01545-2228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00000492

Amount of Each Receipt this Period

26.39

Full Name (Last, First, Middle Initial)

**C. Philip A Tongue**

Mailing Address 22 Millwood Dr

City

Shrewsbury

State

MA

Zip Code

01545-2228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Project Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

397.55

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00000499

Amount of Each Receipt this Period

26.39

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 PageFOR LINE NUMBER: PAGE 364 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Philip A Tongue**

Mailing Address 22 Millwood Dr

City

Shrewsbury

State

MA

Zip Code

01545-2228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Project Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

397.55

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00000498**

Amount of Each Receipt this Period

32.71

Full Name (Last, First, Middle Initial)

**B. Joseph M Tonucci**

Mailing Address 6411 Gold Wagon Ln

City

Mint Hill

State

NC

Zip Code

28227-9289

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

525.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00001177**

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. Joseph M Tonucci**

Mailing Address 6411 Gold Wagon Ln

City

Mint Hill

State

NC

Zip Code

28227-9289

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

525.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00001189**

Amount of Each Receipt this Period

35.00

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

102.71

**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 PageFOR LINE NUMBER: PAGE 365 OF 402  
(check only one)

|                                         |                              |                              |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Joseph M Tonucci**

Mailing Address 6411 Gold Wagon Ln

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Mint Hill | NC    | 28227-9289 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001187

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**B. Kimberly A Troxell**Mailing Address 2213 W Roscoe St  
# 3

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60618-6209 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Director, Commercial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.92

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000187

Amount of Each Receipt this Period

35.54

Full Name (Last, First, Middle Initial)

**C. Kimberly A Troxell**Mailing Address 2213 W Roscoe St  
# 3

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60618-6209 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Director, Commercial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.92

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 1 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000189

Amount of Each Receipt this Period

35.54

SUBTOTAL of Receipts This Page (optional)..... ►

106.08

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 366 OF 402

(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kimberly A Troxell**Mailing Address 2213 W Roscoe St  
# 3

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60618-6209 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Project Director, Commercial

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.92

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00000188

Amount of Each Receipt this Period

35.54

Full Name (Last, First, Middle Initial)

**B. Bernard A Tucker**

Mailing Address 14355 Spring Meadow Ct

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-2490 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Hq Bus Intel Sys

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.98

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000769

Amount of Each Receipt this Period

32.34

Full Name (Last, First, Middle Initial)

**C. Bernard A Tucker**

Mailing Address 14355 Spring Meadow Ct

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Libertyville | IL    | 60048-2490 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Hq Bus Intel Sys

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.98

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000779

Amount of Each Receipt this Period

32.34

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

100.22

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 367 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Bernard A Tucker**

Mailing Address 14355 Spring Meadow Ct

City

Libertyville

State

IL

Zip Code

60048-2490

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Hq Bus Intel Sys

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.98

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000778

Amount of Each Receipt this Period

32.34

Full Name (Last, First, Middle Initial)

**B. Diane Turner-Sojer**

Mailing Address 1012 Oakwood St

City

Gurnee

State

IL

Zip Code

60031-2240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Bus Sys Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.68

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00001570

Amount of Each Receipt this Period

30.38

Full Name (Last, First, Middle Initial)

**C. Diane Turner-Sojer**

Mailing Address 1012 Oakwood St

City

Gurnee

State

IL

Zip Code

60031-2240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Bus Sys Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.68

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 7 | 1 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001583

Amount of Each Receipt this Period

30.38

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

93.10

**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 368 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Diane Turner-Sojer**

Mailing Address 1012 Oakwood St

City State Zip Code  
 Gurnee IL 60031-2240

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Assoc Bus Sys Cons

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.68

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 30 / 2015

Transaction ID : 7/30/2015 00001579

Amount of Each Receipt this Period

30.38

Full Name (Last, First, Middle Initial)

**B. Heather L Twombly**

Mailing Address 12909 Cedar Springs Rd

City State Zip Code  
 Oklahoma City OK 73120-1803

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Uro/Gyn Specialist II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.35

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 02 / 2015

Transaction ID : 7/2/2015 00001003

Amount of Each Receipt this Period

21.93

Full Name (Last, First, Middle Initial)

**C. Heather L Twombly**

Mailing Address 12909 Cedar Springs Rd

City State Zip Code  
 Oklahoma City OK 73120-1803

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Uro/Gyn Specialist II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.35

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 / 16 / 2015

Transaction ID : 7/16/2015 00001014

Amount of Each Receipt this Period

21.93

SUBTOTAL of Receipts This Page (optional)..... ►

74.24

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 369 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Heather L Twombly**

Mailing Address 12909 Cedar Springs Rd

|               |       |            |
|---------------|-------|------------|
| City          | State | Zip Code   |
| Oklahoma City | OK    | 73120-1803 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Uro/Gyn Specialist II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.35

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001012

Amount of Each Receipt this Period

21.93

Full Name (Last, First, Middle Initial)

**B. William A Vollmer**

Mailing Address 258 Harding St

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Grayslake | IL    | 60030-2321 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

US, General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1155.18

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00000057

Amount of Each Receipt this Period

77.92

Full Name (Last, First, Middle Initial)

**C. William A Vollmer**

Mailing Address 258 Harding St

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Grayslake | IL    | 60030-2321 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

US, General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1155.18

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00000058

Amount of Each Receipt this Period

77.92

SUBTOTAL of Receipts This Page (optional)..... ►

177.77

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 PageFOR LINE NUMBER: PAGE 370 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. William A Vollmer**

Mailing Address 258 Harding St

City

Grayslake

State

IL

Zip Code

60030-2321

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

US, General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1155.18

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00000058**

Amount of Each Receipt this Period

77.92

Full Name (Last, First, Middle Initial)

**B. Katherine L Vonderhaar**

Mailing Address 2507 Goodnight Trl

City

Mansfield

State

TX

Zip Code

76063-7565

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.10

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00001017**

Amount of Each Receipt this Period

25.84

Full Name (Last, First, Middle Initial)

**C. Katherine L Vonderhaar**

Mailing Address 2507 Goodnight Trl

City

Mansfield

State

TX

Zip Code

76063-7565

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.10

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00001028**

Amount of Each Receipt this Period

25.84

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

129.60

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 371 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Katherine L Vonderhaar**

Mailing Address 2507 Goodnight Trl

City

Mansfield

State

TX

Zip Code

76063-7565

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

383.10

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00001026

Amount of Each Receipt this Period

25.84

Full Name (Last, First, Middle Initial)

**B. Greg Vosberg**

Mailing Address 5661 W Gunnison St

City

Chicago

State

IL

Zip Code

60630-3215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

886.14

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00002075

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**C. Greg Vosberg**

Mailing Address 5661 W Gunnison St

City

Chicago

State

IL

Zip Code

60630-3215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

886.14

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00002092

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)..... ►

145.84

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 PageFOR LINE NUMBER: PAGE 372 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Greg Vosberg**

Mailing Address 5661 W Gunnison St

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Chicago | IL    | 60630-3215 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director, Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

886.14

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00002083

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. Melissa A Walsh**

Mailing Address 86 Desoto Rd

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| West Roxbury | MA    | 02132-6006 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Global Philanthropy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

883.56

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00002040

Amount of Each Receipt this Period

58.35

Full Name (Last, First, Middle Initial)

**C. Melissa A Walsh**

Mailing Address 86 Desoto Rd

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| West Roxbury | MA    | 02132-6006 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Global Philanthropy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

883.56

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00002057

Amount of Each Receipt this Period

75.85

SUBTOTAL of Receipts This Page (optional)..... ►

194.20

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 373 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Melissa A Walsh**

Mailing Address 86 Desoto Rd

City

West Roxbury

State

MA

Zip Code

02132-6006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr. Director, Global Philanthropy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

883.56

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : 7/30/2015 00002049**

Amount of Each Receipt this Period

67.10

Full Name (Last, First, Middle Initial)

## **B. Leanna Jo Walther**

Mailing Address 1296 Oak Knoll Dr

City

Lake Forest

State

IL

Zip Code

60045-3650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Bhr - Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 02 / 2015

**Transaction ID : 7/2/2015 00000783**

Amount of Each Receipt this Period

66.55

Full Name (Last, First, Middle Initial)

## **C. Leanna Jo Walther**

Mailing Address 1296 Oak Knoll Dr

City

Lake Forest

State

IL

Zip Code

60045-3650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Bhr - Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

718.95

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 16 / 2015

**Transaction ID : 7/16/2015 00000794**

Amount of Each Receipt this Period

66.55

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

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

200.20

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 374 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Leanna Jo Walther**

Mailing Address 1296 Oak Knoll Dr

City

Lake Forest

State

IL

Zip Code

60045-3650

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Bhr - Operations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

718.95

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00000793**

Amount of Each Receipt this Period

66.55

Full Name (Last, First, Middle Initial)

**B. Le Wang**

Mailing Address 338 Colonial Dr

City

Vernon Hills

State

IL

Zip Code

60061-3819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prin Res Scientist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 6 |   |   | 5 |

**Transaction ID : 7/16/2015 00000402**

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Le Wang**

Mailing Address 338 Colonial Dr

City

Vernon Hills

State

IL

Zip Code

60061-3819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prin Res Scientist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00000401**

Amount of Each Receipt this Period

15.00

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

96.55

**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 PageFOR LINE NUMBER: PAGE 375 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Herman M Watkins**

Mailing Address 225 Wood Glen Ln

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Oak Brook | IL    | 60523-1530 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Dir Cit Plg/PRC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

978.10

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00001661**

Amount of Each Receipt this Period

70.16

Full Name (Last, First, Middle Initial)

**B. Herman M Watkins**

Mailing Address 225 Wood Glen Ln

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| Oak Brook | IL    | 60523-1530 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Dir Cit Plg/PRC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

978.10

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 | 6 | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015\_00001676**

Amount of Each Receipt this Period

70.16

Full Name (Last, First, Middle Initial)

**C. Carrie E Webb**

Mailing Address 9131 Hartwell Dr

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Evansville | IN    | 47725-7669 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.11

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015\_00001765**

Amount of Each Receipt this Period

17.87

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

158.19

**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 376 OF 402  
(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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

## **A. Carrie E Webb**

Mailing Address 9131 Hartwell Dr

City State Zip Code  
 Evansville IN 47725-7669

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.11

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00001782

Amount of Each Receipt this Period

17.87

Full Name (Last, First, Middle Initial)

## **B. Carrie E Webb**

Mailing Address 9131 Hartwell Dr

City State Zip Code  
 Evansville IN 47725-7669

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Prof Pharma Rep III

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.11

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00001775

Amount of Each Receipt this Period

17.87

Full Name (Last, First, Middle Initial)

## **C. John Rhodes Webb III**

Mailing Address 1027 Aberdeen Ln

City State Zip Code  
 Mundelein IL 60060-1201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr App Technlgies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.42

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000590

Amount of Each Receipt this Period

44.44

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

80.18

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 377 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. John Rhodes Webb III**

Mailing Address 1027 Aberdeen Ln

City

Mundelein

State

IL

Zip Code

60060-1201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr App Technlgies

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

644.42

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000599

Amount of Each Receipt this Period

44.44

Full Name (Last, First, Middle Initial)

**B. John Rhodes Webb III**

Mailing Address 1027 Aberdeen Ln

City

Mundelein

State

IL

Zip Code

60060-1201

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Sr Mgr App Technlgies

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

644.42

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000598

Amount of Each Receipt this Period

44.44

Full Name (Last, First, Middle Initial)

**C. Kristen Weirick**

Mailing Address 944 Leonard Wood W

City

Highwood

State

IL

Zip Code

60040-2002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Talent Acquistn, Diversity &amp; Inclu

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

870.24

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 2 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001974

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional)..... ►

148.88

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 PageFOR LINE NUMBER: PAGE 378 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Kristen Weirick**

Mailing Address 944 Leonard Wood W

City

Highwood

State

IL

Zip Code

60040-2002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Talent Acquistn, Diversity &amp; Inclu

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

870.24

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/16/2015 00001991**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**B. Kristen Weirick**

Mailing Address 944 Leonard Wood W

City

Highwood

State

IL

Zip Code

60040-2002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, Talent Acquistn, Diversity &amp; Inclu

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

870.24

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/30/2015 00001983**

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

**C. Matthew M Widman**

Mailing Address 837 Hawthorne Ln

City

Libertyville

State

IL

Zip Code

60048-1684

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

US, General Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 7/2/2015 00000209**

Amount of Each Receipt this Period

20.00

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

140.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 379 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Matthew M Widman**

Mailing Address 837 Hawthorne Ln

City

Libertyville

State

IL

Zip Code

60048-1684

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

US, General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000211

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Matthew M Widman**

Mailing Address 837 Hawthorne Ln

City

Libertyville

State

IL

Zip Code

60048-1684

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

US, General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00000210

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Scott Alfred Wienke**

Mailing Address 2715 11th St

City

Winthrop Harbor

State

IL

Zip Code

60096-1518

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Global Trade Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000365

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 PageFOR LINE NUMBER: PAGE 380 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Scott Alfred Wienke**

Mailing Address 2715 11th St

City

Winthrop Harbor

State

IL

Zip Code

60096-1518

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Global Trade Compliance

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000371

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Scott Alfred Wienke**

Mailing Address 2715 11th St

City

Winthrop Harbor

State

IL

Zip Code

60096-1518

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Dir Global Trade Compliance

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000370

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. David A Williams**

Mailing Address 520 Stablewood Ln

City

Lake Forest

State

IL

Zip Code

60045-2683

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Medical Director

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

743.23

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00001654

Amount of Each Receipt this Period

50.26

SUBTOTAL of Receipts This Page (optional)..... ►

90.26

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 381 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. David A Williams**

Mailing Address 520 Stablewood Ln

City

Lake Forest

State

IL

Zip Code

60045-2683

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

743.23

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001668

Amount of Each Receipt this Period

50.26

Full Name (Last, First, Middle Initial)

**B. David A Williams**

Mailing Address 520 Stablewood Ln

City

Lake Forest

State

IL

Zip Code

60045-2683

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

743.23

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001664

Amount of Each Receipt this Period

50.26

Full Name (Last, First, Middle Initial)

**C. Laura A Williams**

Mailing Address 1150 Hadley Cir

City

Gurnee

State

IL

Zip Code

60031-9107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Group Project Dir

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00000252

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

120.52

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 382 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Laura A Williams**

Mailing Address 1150 Hadley Cir

City

Gurnee

State

IL

Zip Code

60031-9107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Group Project Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000255

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Laura A Williams**

Mailing Address 1150 Hadley Cir

City

Gurnee

State

IL

Zip Code

60031-9107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Group Project Dir

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000254

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Matthew Williams**

Mailing Address 19380 Hayden Ct

City

Brookfield

State

WI

Zip Code

53045-5126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, State Government Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1455.30

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00002089

Amount of Each Receipt this Period

97.60

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

137.60

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 383 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Matthew Williams**

Mailing Address 19380 Hayden Ct

City

Brookfield

State

WI

Zip Code

53045-5126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, State Government Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1455.30

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00002106

Amount of Each Receipt this Period

97.60

Full Name (Last, First, Middle Initial)

**B. Matthew Williams**

Mailing Address 19380 Hayden Ct

City

Brookfield

State

WI

Zip Code

53045-5126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

VP, State Government Affairs

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1455.30

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00002097

Amount of Each Receipt this Period

97.60

Full Name (Last, First, Middle Initial)

**C. Robert J Williams**Mailing Address 1 Tara Blvd  
Ste 237

City

Nashua

State

NH

Zip Code

03062-2809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/2/2015 00001381

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

215.20

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 384 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Robert J Williams**Mailing Address 1 Tara Blvd  
Ste 237

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Nashua | NH    | 03062-2809 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 16    | / | 2015        |

Transaction ID : 7/16/2015 00001392

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B. Robert J Williams**Mailing Address 1 Tara Blvd  
Ste 237

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| Nashua | NH    | 03062-2809 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 30    | / | 2015        |

Transaction ID : 7/30/2015 00001391

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**C. Leslie A Williamson**

Mailing Address 885 Poplar Rd

|            |       |            |
|------------|-------|------------|
| City       | State | Zip Code   |
| Charleston | WV    | 25302-2809 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Acct Exc I

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.82

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 02    | / | 2015        |

Transaction ID : 7/2/2015 00001521

Amount of Each Receipt this Period

20.44

SUBTOTAL of Receipts This Page (optional)..... ►

60.44

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 385 OF 402

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Leslie A Williamson**

Mailing Address 885 Poplar Rd

City

Charleston

State

WV

Zip Code

25302-2809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Acct Exc I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

302.82

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00001530

Amount of Each Receipt this Period

20.44

Full Name (Last, First, Middle Initial)

**B. Leslie A Williamson**

Mailing Address 885 Poplar Rd

City

Charleston

State

WV

Zip Code

25302-2809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Franchise Acct Exc I

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

302.82

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/30/2015 00001527

Amount of Each Receipt this Period

20.44

Full Name (Last, First, Middle Initial)

**C. Richard J Willis**

Mailing Address 600 S Taylor Ave

City

Oak Park

State

IL

Zip Code

60304-1622

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Ast Cntrl Glb Sply

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

312.15

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |

Transaction ID : 7/16/2015 00000153

Amount of Each Receipt this Period

62.43

SUBTOTAL of Receipts This Page (optional)..... ►

103.31

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 386 OF 402

☒ 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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Richard J Willis**

Mailing Address 600 S Taylor Ave

City

Oak Park

State

IL

Zip Code

60304-1622

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Ast Cntrl Glb Sply

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.15

Date of Receipt

07 / 30 / 2015

Transaction ID : 7/30/2015 00000153

Amount of Each Receipt this Period

62.43

Full Name (Last, First, Middle Initial)

**B. Thomas J Wilson**

Mailing Address 40538 N Lilac Pl

City

Antioch

State

IL

Zip Code

60002-8465

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Gpo IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1322.40

Date of Receipt

07 / 02 / 2015

Transaction ID : 7/2/2015 00000500

Amount of Each Receipt this Period

89.20

Full Name (Last, First, Middle Initial)

**C. Thomas J Wilson**

Mailing Address 40538 N Lilac Pl

City

Antioch

State

IL

Zip Code

60002-8465

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Gpo IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1322.40

Date of Receipt

07 / 16 / 2015

Transaction ID : 7/16/2015 00000507

Amount of Each Receipt this Period

89.20

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

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

240.83

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 387 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Thomas J Wilson**

Mailing Address 40538 N Lilac Pl

City

Antioch

State

IL

Zip Code

60002-8465

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Director Gpo IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1322.40

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/30/2015 00000506

Amount of Each Receipt this Period

89.20

Full Name (Last, First, Middle Initial)

**B. Richard D Wolff**

Mailing Address 21971 W Brentwood Ln

City

Lake Villa

State

IL

Zip Code

60046-9511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

App Tech Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.08

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/2/2015 00000118

Amount of Each Receipt this Period

43.58

Full Name (Last, First, Middle Initial)

**C. Richard D Wolff**

Mailing Address 21971 W Brentwood Ln

City

Lake Villa

State

IL

Zip Code

60046-9511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

App Tech Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.08

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 |   | 2 | 0 | 1 | 5 |   |   |

Transaction ID : 7/16/2015 00000119

Amount of Each Receipt this Period

43.58

SUBTOTAL of Receipts This Page (optional)..... ►

176.36

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 388 OF 402

(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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard D Wolff

Mailing Address 21971 W Brentwood Ln

City State Zip Code  
Lake Villa IL 60046-9511

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

App Tech Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.08

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00000119

Amount of Each Receipt this Period

43.58

Full Name (Last, First, Middle Initial)

B. Shawn A Xifo

Mailing Address 18 Bramford St

City State Zip Code  
Ladera Ranch CA 92694-0211

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.41

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 02 / 2015

Transaction ID : 7/2/2015 00001496

Amount of Each Receipt this Period

29.05

Full Name (Last, First, Middle Initial)

C. Shawn A Xifo

Mailing Address 18 Bramford St

City State Zip Code  
Ladera Ranch CA 92694-0211

FEC ID number of contributing federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.41

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 16 / 2015

Transaction ID : 7/16/2015 00001505

Amount of Each Receipt this Period

29.05

SUBTOTAL of Receipts This Page (optional)..... ►

101.68

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 PageFOR LINE NUMBER: PAGE 389 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Shawn A Xifo**

Mailing Address 18 Bramford St

|              |       |            |
|--------------|-------|------------|
| City         | State | Zip Code   |
| Ladera Ranch | CA    | 92694-0211 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Senior District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.41

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 3 | 0 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/30/2015 00001503**

Amount of Each Receipt this Period

29.05

Full Name (Last, First, Middle Initial)

**B. Julie Young**

Mailing Address 3501 Gadwell Ct

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Raleigh | NC    | 27606-8495 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

659.01

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 2 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/2/2015 00001031**

Amount of Each Receipt this Period

44.45

Full Name (Last, First, Middle Initial)

**C. Julie Young**

Mailing Address 3501 Gadwell Ct

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Raleigh | NC    | 27606-8495 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

659.01

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 1 | 6 |   | 2 | 0 | 1 | 5 |   |   |

**Transaction ID : 7/16/2015 00001042**

Amount of Each Receipt this Period

44.45

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

117.95

**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 PageFOR LINE NUMBER: PAGE 390 OF 402  
(check only one)

|                                         |                              |                              |                             |                             |                             |                             |                             |                             |
|-----------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <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)

**AbbVie Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Julie Young**

Mailing Address 3501 Gadwell Ct

City  
RaleighState  
NCZip Code  
27606-8495FEC ID number of contributing  
federal political committee.

C

Name of Employer

AbbVie Inc.

Occupation

Managed Care Account Executive II

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

659.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : 7/30/2015 00001040

Amount of Each Receipt this Period

44.45

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

44.45

62134.89

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 391 OF 402

(check only one)

|                              |                              |                              |                                        |
|------------------------------|------------------------------|------------------------------|----------------------------------------|
| <input 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 checked="" 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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Cantor for Congress**

Mailing Address PO Box 17813

City

Richmond

State

VA

Zip Code

23226-7813

FEC ID number of contributing  
federal political committee.

C

C00355461

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 7 |   |   |   |   | 2 | 0 |   |   |

Transaction ID : 9C90890E8B9D6A186F9

Amount of Each Receipt this Period

750.00

Refund of 2014 general contribution

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

Amount of Each Receipt this Period

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

750.00

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

750.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 392 OF 402

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Bank of America**Mailing Address 780 N. Western Ave.  
2nd Floor

City Lake Forest State IL Zip Code 60045

Purpose of Disbursement  
Bank service charge

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 07 2015

Transaction ID : BF8C2257606E83229D9

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**B. Bank of America**Mailing Address 780 N. Western Ave.  
2nd Floor

City Lake Forest State IL Zip Code 60045

Purpose of Disbursement  
Wire Transfer Fee

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 09 2015

Transaction ID : 23C116BBCF39FDB246D

Amount of Each Disbursement this Period

15.00

Full Name (Last, First, Middle Initial)

**C. Bank of America**Mailing Address 780 N. Western Ave.  
2nd Floor

City Lake Forest State IL Zip Code 60045

Purpose of Disbursement  
Wire Transfer Fee

Candidate Name

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 30 2015

Transaction ID : AD107045494A61AACF4

Amount of Each Disbursement this Period

15.00

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

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

45.00

45.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 393 OF 402

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <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 |

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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Alamo PAC**Mailing Address 919 Congress Avenue  
Suite 1400

City Austin State TX Zip Code 78701

Purpose of Disbursement  
2015 Contribution

Candidate Name

Alamo PAC

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☐ General  
☒ Other (specify) ☐ Contribution

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 15    |   | 2015        |

Transaction ID : 949E04CE0CABF995E72

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. Ami Bera for Congress**

Mailing Address PO Box 582496

City Elk Grove State CA Zip Code 95758

Purpose of Disbursement  
2016 Primary

Candidate Name

Ameriash B. Bera

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ☐ Contribution

State: CA District: 07

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 15    |   | 2015        |

Transaction ID : 6F3E293BFCF16627817

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. Anna Eshoo for Congress**

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
2016 Primary

Candidate Name

Anna G. Eshoo

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ☐ Contribution

State: CA District: 18

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 15    |   | 2015        |

Transaction ID : 0EE85CCD8882F9290B2

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

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

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

|         |
|---------|
| 3000.00 |
|---------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 394 OF 402

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <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 |

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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Bill Flores for Congress**

Mailing Address PO Box 6207

|       |       |          |
|-------|-------|----------|
| City  | State | Zip Code |
| Bryan | TX    | 77805    |

Purpose of Disbursement  
2016 Primary

011

Candidate Name

William H. Flores

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 17

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 15    | / | 2015        |

Transaction ID : DD75DA7BAF578B75582

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. Blue Hen PAC**

Mailing Address PO Box 15293

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Washington | DC    | 20003    |

Purpose of Disbursement  
2015 Contribution

011

Candidate Name

Blue Hen PAC

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2015  
☐ Primary ☐ General  
☒ Other (specify) ▼ Contribution

State: District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 15    | / | 2015        |

Transaction ID : 2DCA1CFED72FD38C373

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. Diane Black for Congress**

Mailing Address PO Box 1437

|          |       |            |
|----------|-------|------------|
| City     | State | Zip Code   |
| Gallatin | TN    | 37066-1437 |

Purpose of Disbursement  
2016 Primary

011

Candidate Name

Diane Lynn Black

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 06

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 15    | / | 2015        |

Transaction ID : F336C3D310EE11B27D6

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

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

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

|         |
|---------|
| 4000.00 |
|---------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 395 OF 402

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <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 |

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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Dr. Raul Ruiz for Congress**

Mailing Address PO Box 3433

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Palm Desert | CA    | 92261    |

Purpose of Disbursement  
2016 Primary

011

Candidate Name

Raul Ruiz

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 36

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 15    | / | 2015        |

Transaction ID : 820B80AA85A8D60DCA8

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. Hoosiers First PAC**

Mailing Address PO Box 772

|              |       |          |
|--------------|-------|----------|
| City         | State | Zip Code |
| Indianapolis | IN    | 46206    |

Purpose of Disbursement  
2015 Contribution

011

Candidate Name

Hoosiers First PAC

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2015

☐ Primary ☐ General  
☒ Other (specify) ▼ Contribution

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 15    | / | 2015        |

Transaction ID : 69273292381F1D9EE5F

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. Hudson for Congress**

Mailing Address PO Box 5053

|         |       |            |
|---------|-------|------------|
| City    | State | Zip Code   |
| Concord | NC    | 28027-1500 |

Purpose of Disbursement  
2016 Primary

011

Candidate Name

Richard Lane Hudson Jr.

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NC District: 08

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 15    | / | 2015        |

Transaction ID : 9A2A1DDBD07AF05CDAE

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

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

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

|         |
|---------|
| 3000.00 |
|---------|

|  |
|--|
|  |
|--|

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 396 OF 402

|                              |                              |                                        |                              |                             |                              |
|------------------------------|------------------------------|----------------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <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 |

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)

AbbVie Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Marsha Blackburn for Congress, Inc.**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 15    |   | 2015        |

Mailing Address PO Box 3750

**Transaction ID : 7423D70C41359C3C121**

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>Brentwood | State<br>TN | Zip Code<br>37024-3750 |
|-------------------|-------------|------------------------|

Amount of Each Disbursement this Period

Purpose of Disbursement  
2016 Primary

011

|                                         |
|-----------------------------------------|
| Amount of Each Disbursement this Period |
| 1500.00                                 |

Candidate Name

Marsha Wedgeworth Blackburn

Category/  
Type

|                |                                                                                                                    |                                                                                                                                                      |
|----------------|--------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: TN      | District: 07                                                                                                       |                                                                                                                                                      |

Full Name (Last, First, Middle Initial)

**B. Moran for Kansas**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 15    |   | 2015        |

Mailing Address PO Box 1151

**Transaction ID : DFFAACE466DF1F73809**

|              |             |                        |
|--------------|-------------|------------------------|
| City<br>Hays | State<br>KS | Zip Code<br>67601-1151 |
|--------------|-------------|------------------------|

Amount of Each Disbursement this Period

Purpose of Disbursement  
2016 Primary

011

|                                         |
|-----------------------------------------|
| Amount of Each Disbursement this Period |
| 1000.00                                 |

Candidate Name

Jerry W. Moran

Category/  
Type

|                |                                                                                                                    |                                                                                                                                                      |
|----------------|--------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| Office Sought: | <input type="checkbox"/> House<br><input checked="" type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: KS      | District:                                                                                                          |                                                                                                                                                      |

Full Name (Last, First, Middle Initial)

**C. Quigley for Congress**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 15    |   | 2015        |

Mailing Address 2652 N Southport Avenue  
Unit E**Transaction ID : 4867BE23D64E018EE2B**

|                 |             |                   |
|-----------------|-------------|-------------------|
| City<br>Chicago | State<br>IL | Zip Code<br>60614 |
|-----------------|-------------|-------------------|

Amount of Each Disbursement this Period

Purpose of Disbursement  
2016 Primary

011

|                                         |
|-----------------------------------------|
| Amount of Each Disbursement this Period |
| 1000.00                                 |

Candidate Name

Michael Quigley

Category/  
Type

|                |                                                                                                                    |                                                                                                                                                      |
|----------------|--------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| Office Sought: | <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For: 2016<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| State: IL      | District: 05                                                                                                       |                                                                                                                                                      |

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00





|  |     |  |     |  |     |  |     |   |    |  |     |
|--|-----|--|-----|--|-----|--|-----|---|----|--|-----|
|  | 21b |  | 22  |  | 23  |  | 24  |   | 25 |  | 26  |
|  | 27  |  | 28a |  | 28b |  | 28c | X | 29 |  | 30b |

AbbVie Political Action Committee

### A. Biss for Senate

011

1500.00

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

**B. Citizens for Michael P. McAuliffe**

07 / 06 / 2015

011

2000.00

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

### C. Citizens for Trotter

Three digital displays are shown, each with a row of small squares above the main display area. The first display shows '07' with two squares above it. The second display shows '06' with two squares above it. The third display shows '2015' with four squares above it.

011

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:  District:

6000.00

|  |     |  |     |  |     |  |     |  |      |  |     |
|--|-----|--|-----|--|-----|--|-----|--|------|--|-----|
|  | 21b |  | 22  |  | 23  |  | 24  |  | 25   |  | 26  |
|  | 27  |  | 28a |  | 28b |  | 28c |  | X 29 |  | 30b |

AbbVie Political Action Committee

### A. Committee to Elect Sheri Jesiel

Mailing Address 11045 W. Russell Road

| City            | State | Zip Code |
|-----------------|-------|----------|
| Winthrop Harbor | IL    | 60096    |

| Purpose of Disbursement                                                                                                                                                                                  | Nonfederal Contribution                                                                                                                                                                                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>1. <u>  </u></p> <p>2. <u>  </u></p> <p>3. <u>  </u></p> <p>4. <u>  </u></p> <p>5. <u>  </u></p> <p>6. <u>  </u></p> <p>7. <u>  </u></p> <p>8. <u>  </u></p> <p>9. <u>  </u></p> <p>10. <u>  </u></p> | <p>1. <u>  </u></p> <p>2. <u>  </u></p> <p>3. <u>  </u></p> <p>4. <u>  </u></p> <p>5. <u>  </u></p> <p>6. <u>  </u></p> <p>7. <u>  </u></p> <p>8. <u>  </u></p> <p>9. <u>  </u></p> <p>10. <u>  </u></p> |

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Date of Disbursement



Transaction ID : 5220BF5016AF73B2C22

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Dan Kotowski for the 28th District**

Mailing Address 1324 S Crescent Avenue

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Park Ridge | IL    | 60068    |

| Purpose of Disbursement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Nonfederal Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>1. <i>State of Alaska</i></p> <p>2. <i>State of California</i></p> <p>3. <i>State of Colorado</i></p> <p>4. <i>State of Connecticut</i></p> <p>5. <i>State of Delaware</i></p> <p>6. <i>State of Florida</i></p> <p>7. <i>State of Georgia</i></p> <p>8. <i>State of Hawaii</i></p> <p>9. <i>State of Idaho</i></p> <p>10. <i>State of Illinois</i></p> <p>11. <i>State of Indiana</i></p> <p>12. <i>State of Iowa</i></p> <p>13. <i>State of Kansas</i></p> <p>14. <i>State of Kentucky</i></p> <p>15. <i>State of Louisiana</i></p> <p>16. <i>State of Maine</i></p> <p>17. <i>State of Maryland</i></p> <p>18. <i>State of Massachusetts</i></p> <p>19. <i>State of Michigan</i></p> <p>20. <i>State of Minnesota</i></p> <p>21. <i>State of Missouri</i></p> <p>22. <i>State of Montana</i></p> <p>23. <i>State of Nebraska</i></p> <p>24. <i>State of Nevada</i></p> <p>25. <i>State of New Hampshire</i></p> <p>26. <i>State of New Jersey</i></p> <p>27. <i>State of New Mexico</i></p> <p>28. <i>State of New York</i></p> <p>29. <i>State of North Carolina</i></p> <p>30. <i>State of North Dakota</i></p> <p>31. <i>State of Ohio</i></p> <p>32. <i>State of Oklahoma</i></p> <p>33. <i>State of Oregon</i></p> <p>34. <i>State of Pennsylvania</i></p> <p>35. <i>State of Rhode Island</i></p> <p>36. <i>State of South Carolina</i></p> <p>37. <i>State of South Dakota</i></p> <p>38. <i>State of Tennessee</i></p> <p>39. <i>State of Texas</i></p> <p>40. <i>State of Utah</i></p> <p>41. <i>State of Vermont</i></p> <p>42. <i>State of Virginia</i></p> <p>43. <i>State of Washington</i></p> <p>44. <i>State of West Virginia</i></p> <p>45. <i>State of Wisconsin</i></p> <p>46. <i>State of Wyoming</i></p> | <p>1. <i>State of Alaska</i></p> <p>2. <i>State of California</i></p> <p>3. <i>State of Colorado</i></p> <p>4. <i>State of Connecticut</i></p> <p>5. <i>State of Delaware</i></p> <p>6. <i>State of Florida</i></p> <p>7. <i>State of Georgia</i></p> <p>8. <i>State of Hawaii</i></p> <p>9. <i>State of Idaho</i></p> <p>10. <i>State of Illinois</i></p> <p>11. <i>State of Indiana</i></p> <p>12. <i>State of Iowa</i></p> <p>13. <i>State of Kansas</i></p> <p>14. <i>State of Kentucky</i></p> <p>15. <i>State of Louisiana</i></p> <p>16. <i>State of Maine</i></p> <p>17. <i>State of Maryland</i></p> <p>18. <i>State of Massachusetts</i></p> <p>19. <i>State of Michigan</i></p> <p>20. <i>State of Minnesota</i></p> <p>21. <i>State of Missouri</i></p> <p>22. <i>State of Montana</i></p> <p>23. <i>State of Nebraska</i></p> <p>24. <i>State of Nevada</i></p> <p>25. <i>State of New Hampshire</i></p> <p>26. <i>State of New Jersey</i></p> <p>27. <i>State of New Mexico</i></p> <p>28. <i>State of New York</i></p> <p>29. <i>State of North Carolina</i></p> <p>30. <i>State of North Dakota</i></p> <p>31. <i>State of Ohio</i></p> <p>32. <i>State of Oklahoma</i></p> <p>33. <i>State of Oregon</i></p> <p>34. <i>State of Pennsylvania</i></p> <p>35. <i>State of Rhode Island</i></p> <p>36. <i>State of South Carolina</i></p> <p>37. <i>State of South Dakota</i></p> <p>38. <i>State of Tennessee</i></p> <p>39. <i>State of Texas</i></p> <p>40. <i>State of Utah</i></p> <p>41. <i>State of Vermont</i></p> <p>42. <i>State of Virginia</i></p> <p>43. <i>State of Washington</i></p> <p>44. <i>State of West Virginia</i></p> <p>45. <i>State of Wisconsin</i></p> <p>46. <i>State of Wyoming</i></p> |

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Date of Disbursement

07 / 06 / 2015

Transaction ID : 08D7E52AF61B78AC749

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

### C. Friends of Carol Sente

Mailing Address 103 Schelter Road

|              |       |          |
|--------------|-------|----------|
| City         | State | Zip Code |
| Lincolnshire | IL    | 60069    |

| Purpose of Disbursement | Nonfederal Contribution |
|-------------------------|-------------------------|
|                         |                         |

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:  District:

Date of Disbursement

M M / D D / Y Y Y Y  
07 06 2015

Transaction ID : 8EBDA123F4B64FEA041

Amount of Each Disbursement this Period

1000.00

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

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

4000.00



|  |     |  |     |  |     |  |     |  |      |  |     |
|--|-----|--|-----|--|-----|--|-----|--|------|--|-----|
|  | 21b |  | 22  |  | 23  |  | 24  |  | 25   |  | 26  |
|  | 27  |  | 28a |  | 28b |  | 28c |  | X 29 |  | 30b |

AbbVie Political Action Committee

### A. Friends of Hunter

Mailing Address 11604 S. Church

| City    | State | Zip Code |
|---------|-------|----------|
| Chicago | IL    | 60643    |

| Purpose of Disbursement                                                                                                                                                                                  | Nonfederal Contribution                                                                                                                                                                                  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>1. <u>  </u></p> <p>2. <u>  </u></p> <p>3. <u>  </u></p> <p>4. <u>  </u></p> <p>5. <u>  </u></p> <p>6. <u>  </u></p> <p>7. <u>  </u></p> <p>8. <u>  </u></p> <p>9. <u>  </u></p> <p>10. <u>  </u></p> | <p>1. <u>  </u></p> <p>2. <u>  </u></p> <p>3. <u>  </u></p> <p>4. <u>  </u></p> <p>5. <u>  </u></p> <p>6. <u>  </u></p> <p>7. <u>  </u></p> <p>8. <u>  </u></p> <p>9. <u>  </u></p> <p>10. <u>  </u></p> |

Candidate Name \_\_\_\_\_

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : 028B013062DD78463A1

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

### B. Friends of Mulroe

Mailing Address 6687 Northwest Hwy

| City    | State | Zip Code |
|---------|-------|----------|
| Chicago | IL    | 60631    |

| Purpose of Disbursement | Nonfederal Contribution |
|-------------------------|-------------------------|
|                         |                         |

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

07 / 06 / 2015

Transaction ID : 2514A339F3BEFDE5BA2

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

### C. Friends of Robyn Gabel

Mailing Address P.O. Box 6453

| City     | State | Zip Code |
|----------|-------|----------|
| Evanston | IL    | 60204    |

| Purpose of Disbursement                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Nonfederal Contribution                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>1. <i>State of Alaska</i></p> <p>2. <i>State of California</i></p> <p>3. <i>State of Colorado</i></p> <p>4. <i>State of Connecticut</i></p> <p>5. <i>State of Delaware</i></p> <p>6. <i>State of Florida</i></p> <p>7. <i>State of Georgia</i></p> <p>8. <i>State of Hawaii</i></p> <p>9. <i>State of Illinois</i></p> <p>10. <i>State of Indiana</i></p> <p>11. <i>State of Iowa</i></p> <p>12. <i>State of Kansas</i></p> <p>13. <i>State of Kentucky</i></p> <p>14. <i>State of Louisiana</i></p> <p>15. <i>State of Maine</i></p> <p>16. <i>State of Maryland</i></p> <p>17. <i>State of Massachusetts</i></p> <p>18. <i>State of Michigan</i></p> <p>19. <i>State of Minnesota</i></p> <p>20. <i>State of Missouri</i></p> <p>21. <i>State of Montana</i></p> <p>22. <i>State of Nebraska</i></p> <p>23. <i>State of Nevada</i></p> <p>24. <i>State of New Hampshire</i></p> <p>25. <i>State of New Jersey</i></p> <p>26. <i>State of New Mexico</i></p> <p>27. <i>State of New York</i></p> <p>28. <i>State of North Carolina</i></p> <p>29. <i>State of North Dakota</i></p> <p>30. <i>State of Ohio</i></p> <p>31. <i>State of Oklahoma</i></p> <p>32. <i>State of Oregon</i></p> <p>33. <i>State of Pennsylvania</i></p> <p>34. <i>State of Rhode Island</i></p> <p>35. <i>State of South Carolina</i></p> <p>36. <i>State of South Dakota</i></p> <p>37. <i>State of Tennessee</i></p> <p>38. <i>State of Texas</i></p> <p>39. <i>State of Utah</i></p> <p>40. <i>State of Vermont</i></p> <p>41. <i>State of Virginia</i></p> <p>42. <i>State of Washington</i></p> <p>43. <i>State of West Virginia</i></p> <p>44. <i>State of Wisconsin</i></p> <p>45. <i>State of Wyoming</i></p> | <p>1. <i>State of Alaska</i></p> <p>2. <i>State of California</i></p> <p>3. <i>State of Colorado</i></p> <p>4. <i>State of Connecticut</i></p> <p>5. <i>State of Delaware</i></p> <p>6. <i>State of Florida</i></p> <p>7. <i>State of Georgia</i></p> <p>8. <i>State of Hawaii</i></p> <p>9. <i>State of Illinois</i></p> <p>10. <i>State of Indiana</i></p> <p>11. <i>State of Iowa</i></p> <p>12. <i>State of Kansas</i></p> <p>13. <i>State of Kentucky</i></p> <p>14. <i>State of Louisiana</i></p> <p>15. <i>State of Maine</i></p> <p>16. <i>State of Maryland</i></p> <p>17. <i>State of Massachusetts</i></p> <p>18. <i>State of Michigan</i></p> <p>19. <i>State of Minnesota</i></p> <p>20. <i>State of Missouri</i></p> <p>21. <i>State of Montana</i></p> <p>22. <i>State of Nebraska</i></p> <p>23. <i>State of Nevada</i></p> <p>24. <i>State of New Hampshire</i></p> <p>25. <i>State of New Jersey</i></p> <p>26. <i>State of New Mexico</i></p> <p>27. <i>State of New York</i></p> <p>28. <i>State of North Carolina</i></p> <p>29. <i>State of North Dakota</i></p> <p>30. <i>State of Ohio</i></p> <p>31. <i>State of Oklahoma</i></p> <p>32. <i>State of Oregon</i></p> <p>33. <i>State of Pennsylvania</i></p> <p>34. <i>State of Rhode Island</i></p> <p>35. <i>State of South Carolina</i></p> <p>36. <i>State of South Dakota</i></p> <p>37. <i>State of Tennessee</i></p> <p>38. <i>State of Texas</i></p> <p>39. <i>State of Utah</i></p> <p>40. <i>State of Vermont</i></p> <p>41. <i>State of Virginia</i></p> <p>42. <i>State of Washington</i></p> <p>43. <i>State of West Virginia</i></p> <p>44. <i>State of Wisconsin</i></p> <p>45. <i>State of Wyoming</i></p> |

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : 6BAD508E55F2957A79D

Amount of Each Disbursement this Period

2000.00

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

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

5500.00

|  |     |  |     |  |     |  |     |  |      |  |     |
|--|-----|--|-----|--|-----|--|-----|--|------|--|-----|
|  | 21b |  | 22  |  | 23  |  | 24  |  | 25   |  | 26  |
|  | 27  |  | 28a |  | 28b |  | 28c |  | X 29 |  | 30b |

AbbVie Political Action Committee

### A. Julie Morrison for State Senate

Date of Disbursement



**Transaction ID : 825B45262E62E6183C9**

011

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

1000.00

Date of Disbursement

Amount of Each Disbursement this Period

Category/  
TypeCategory/  
Type

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

Amount of Each Disbursement this Period

Date of Disbursement

Amount of Each Disbursement this Period

Category/  
TypeCategory/  
Type

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

Amount of Each Disbursement this Period

[illegible]

1000.00

16500.00