

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Regeneron Pharmaceuticals, Inc. PAC

ADDRESS (number and street) **777 Old Saw Mill River Road**
 Check if different than previously reported. (ACC) **Tarrytown NY 10591**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00562264 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) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on **11 / 08 / 2016** in the State of
(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on **/ /** in the State of

5. Covering Period **10 / 01 / 2016** through **10 / 19 / 2016**

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

Signature of Treasurer **Landry, Robert, E., ,** [Electronically Filed] Date **10 / 27 / 2016**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Regeneron Pharmaceuticals, Inc. PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="7751.35"/>	<input type="text" value="7751.35"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="70080.55"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2096.46"/>	<input type="text" value="50948.17"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="72177.01"/>	<input type="text" value="128499.52"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="23135.55"/>	<input type="text" value="79458.06"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="49041.46"/>	<input type="text" value="49041.46"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Regeneron Pharmaceuticals, Inc. PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
10 / 19 / 2016

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).....	2091.46	44513.02
(ii) Unitemized	5.00	2512.64
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2096.46	47025.66
(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)	2096.46	47025.66
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	3922.51
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2096.46	50948.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2096.46	50948.17

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	435.55	4358.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	435.55	4358.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	22700.00	75100.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	23135.55	79458.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23135.55	79458.06

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2096.46	47025.66
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2096.46	47025.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	435.55	4358.06
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	3922.51
38. Net Operating Expenditures (subtract Line 37 from Line 36)	435.55	435.55

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

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

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

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

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4842
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll deduction

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4854
 Amount of Each Receipt this Period 10.00
 Memo Item
 Payroll deduction

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4856
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll deduction

SUBTOTAL of Receipts This Page (optional).....	227.30
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 7 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4851
 Amount of Each Receipt this Period 96.15
 Memo Item
 Payroll deduction

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4850
 Amount of Each Receipt this Period 96.15
 Memo Item
 Payroll deduction

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4855
 Amount of Each Receipt this Period 50.00
 Memo Item
 Payroll deduction

SUBTOTAL of Receipts This Page (optional).....	242.30
TOTAL This Period (last page this line number only).....	

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

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

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

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4853
 Amount of Each Receipt this Period 96.15
 Memo Item
 Payroll deduction

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4858
 Amount of Each Receipt this Period 38.46
 Memo Item
 Payroll deduction

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4859
 Amount of Each Receipt this Period 96.15
 Memo Item
 Payroll deduction

SUBTOTAL of Receipts This Page (optional).....	230.76
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: (check only one)	PAGE 9 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4843
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll deduction

B. Loosen, Erin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Old Saw Mill River Road
 City Tarrytown State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Regeneron Pharmaceuticals Inc. Occupation (for Individual) Associate Director Corporate Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4844
 Amount of Each Receipt this Period 10.00
 Memo Item
 Payroll deduction

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4849
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll deduction

SUBTOTAL of Receipts This Page (optional).....	394.60
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: (check only one)	PAGE 10 OF 17
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4841
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll deduction

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4861
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll deduction

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4845
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll deduction

SUBTOTAL of Receipts This Page (optional).....	576.90
TOTAL This Period (last page this line number only).....	

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

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

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

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4846
 Amount of Each Receipt this Period 10.00
 Memo Item
 Payroll deduction

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4848
 Amount of Each Receipt this Period 192.30
 Memo Item
 Payroll deduction

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4860
 Amount of Each Receipt this Period 96.15
 Memo Item
 Payroll deduction

SUBTOTAL of Receipts This Page (optional).....▶	298.45
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 12 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4852
 Amount of Each Receipt this Period 96.15
 Memo Item
 Payroll deduction

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

Date of Receipt 10 / 14 / 2016
Transaction ID : SA11AI.4847
 Amount of Each Receipt this Period 25.00
 Memo Item
 Payroll deduction

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	121.15
TOTAL This Period (last page this line number only).....▶	2091.46

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. JP Morgan Chase Bank, NA		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016	
Mailing Address Two Corporate Drive		FEC Identification Number C []	
City Shelton	State CT	Zip Code 06484	Transaction ID : SB21B.4863
Purpose of Disbursement Bank fees		Category/ Type 001	Amount of Each Disbursement this Period 435.55
Candidate Name		Memo Item <input type="checkbox"/>	
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:			

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	435.55
TOTAL This Period (last page this line number only).....▶	435.55

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. BENNET FOR COLORADO

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3078

City DENVER State CO Zip Code 80201

Purpose of Disbursement
Political contribution

011
Category/
Type

Candidate Name
BENNET, MICHAEL F, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CO District: 00

Date of Disbursement
MM / DD / YYYY
10 / 04 / 2016

FEC Identification Number
C S0CO00211
Transaction ID : **SB23.4876**
Amount of Each Disbursement this Period
1000.00

Memo Item

B. BOB CASEY FOR SENATE INC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 58746

City PHILADELPHIA State PA Zip Code 19102

Purpose of Disbursement
Political contribution

011
Category/
Type

Candidate Name
CASEY, ROBERT P JR, , ,

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

Date of Disbursement
MM / DD / YYYY
10 / 07 / 2016

FEC Identification Number
C S6PA00217
Transaction ID : **SB23.4880**
Amount of Each Disbursement this Period
1000.00

Memo Item

C. BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 8277

City THE WOODLANDS State TX Zip Code 77387

Purpose of Disbursement
Political contribution

011
Category/
Type

Candidate Name
BRADY, KEVIN, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: TX District: 08

Date of Disbursement
MM / DD / YYYY
10 / 04 / 2016

FEC Identification Number
C H6TX08100
Transaction ID : **SB23.4864**
Amount of Each Disbursement this Period
1000.00

Memo Item

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

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

3000.00

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

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FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. COLLINS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016
Mailing Address PO BOX 386		FEC Identification Number C H8NY29032 Transaction ID : SB23.4879
City CLARENCE	State NY	Zip Code 14031
Purpose of Disbursement Political contribution		011 Category/Type
Candidate Name COLLINS, CHRISTOPHER C, , ,		Amount of Each Disbursement this Period 1900.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 27	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Gillibrand for Senate		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016
Mailing Address 126 C Street, NW 2nd Floor		FEC Identification Number C S0NY00410 Transaction ID : SB23.4886
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Political contribution		011 Category/Type
Candidate Name Gillibrand, Kristen, Elizabeth, ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. IMPACT		Date of Disbursement MM / DD / YYYY 10 / 14 / 2016
Mailing Address 192 LEXINGTON AVE. SUITE 1001		FEC Identification Number C Transaction ID : SB23.4891
City NEW YORK	State NY	Zip Code 10016
Purpose of Disbursement Political contribution		011 Category/Type
Candidate Name		Amount of Each Disbursement this Period 5000.00
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:	<input type="checkbox"/> Memo Item

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

7900.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Regeneron Pharmaceuticals, Inc. PAC

Full Name (Last, First, Middle Initial)

A. MAKING BUSINESS EXCEL POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 2687

City
CODY

State
WY

Zip Code
82414

Purpose of Disbursement
Political contribution

011

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB23.4869

Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PASCRELL FOR CONGRESS

Mailing Address POB 100

City
TEANECK

State
NJ

Zip Code
07666

Purpose of Disbursement
Political contribution

011

Category/
Type

Candidate Name

PASCRELL, WILLIAM J. HON., , ,

Office Sought:
 House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify)

State: NJ District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2016			

FEC Identification Number

C H6NJ08118

Transaction ID : SB23.4888

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PEOPLE FOR PATTY MURRAY

Mailing Address PO BOX 3662

City
SEATTLE

State
WA

Zip Code
98124

Purpose of Disbursement
Political contribution

011

Category/
Type

Candidate Name

MURRAY, PATTY, , ,

Office Sought:
 House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			11			2016			

FEC Identification Number

C [REDACTED]

Transaction ID : SB23.4887

Amount of Each Disbursement this Period

[REDACTED] 900.00

Memo Item

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

[REDACTED] 3900.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. RICHARD E NEAL FOR CONGRESS COMMITTEE		Date of Disbursement MM / DD / YYYY 10 / 07 / 2016
Mailing Address 76 MAGNOLIA TERRACE		FEC Identification Number C H8MA02041 Transaction ID : SB23.4883
City SPRINGFIELD	State MA	Zip Code 01108
Purpose of Disbursement Political contribution		Amount of Each Disbursement this Period 2700.00
Candidate Name NEAL, RICHARD, E., ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA District: 01	Category/Type 011	

Full Name (Last, First, Middle Initial) B. TIBERI FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016
Mailing Address 2931 E DUBLIN GRANVILLE ROAD SUITE 190		FEC Identification Number C H0OH12062 Transaction ID : SB23.4872
City COLUMBUS	State OH	Zip Code 43231
Purpose of Disbursement Political contribution		Amount of Each Disbursement this Period 2700.00
Candidate Name TIBERI, PATRICK J., , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 12	Category/Type 011	

Full Name (Last, First, Middle Initial) C. TOM REED FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 04 / 2016
Mailing Address PO BOX 10847		FEC Identification Number C H0NY29054 Transaction ID : SB23.4867
City ROCHESTER	State NY	Zip Code 14610
Purpose of Disbursement Political contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name REED, THOMAS W II, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 23	Category/Type 011	

SUBTOTAL of Disbursements This Page (optional).....▶	7900.00
TOTAL This Period (last page this line number only).....▶	22700.00