

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

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

FOR LINE NUMBER: PAGE 15 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Alexion Pharmaceuticals Inc. PAC

A. Rebecca Velez Frey
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 College Street
 City New Haven State CT Zip Code 06510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Alexion Pharmaceuticals, Inc. Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015
Transaction ID : SA11AI.4688
 Amount of Each Receipt this Period
 1000.00

B. Stephanie Wolfe
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 College Street
 City New Haven State CT Zip Code 06510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Alexion Pharmaceuticals, Inc. Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2015
Transaction ID : SA11AI.4661
 Amount of Each Receipt this Period
 2500.00

C. Keith Woods
 Full Name (Last, First, Middle Initial)
 Mailing Address 100 College Street
 City New Haven State CT Zip Code 06510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Alexion Pharmaceuticals, Inc. Occupation Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 23 / 2015
Transaction ID : SA11AI.4685
 Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	94000.00