

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER  
2008 DEC 19 PM 12:55

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

MILLENNIUM PHARMACEUTICALS INC PAC

ADDRESS (number and street)

1401 H Street NW

Suite 200



Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER CITY STATE ZIPCODE

C00407460

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 Quarterly 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 (12G)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day Post -Election Report for the:

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

Election on 11 04 2008 in the State of 0

5. Covering Period 10 16 2008 through 11 24 2008

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 Michael J. Eging

Signature of Treasurer

Date

12

03

2008

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)

28039951860

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
MILLENNIUM PHARMACEUTICALS INC PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	V	W	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	V	W	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>V</td><td>W</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	V	W	Y	2	0	0	8		1126.00
Y	V	W	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	2875.00									
(c) Total Receipts (from Line 19) .....	1971.00	19220.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	4846.00	20346.00								
7. Total Disbursements (from Line 31) .....	1500.00	17000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	3346.00	3346.00								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

28039951861

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name  
**MILLENNIUM PHARMACEUTICALS INC PAC**

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	W	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	W	Y
2	0	0	8

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	1500.00	13270.00
(i) Itemized (use Schedule A) .....	471.00	5950.00
(ii) Unitemized .....	1971.00	19220.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	1971.00	19220.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (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)) .....	1971.00	19220.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1971.00	19220.00

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1500.00	17000.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	1500.00	17000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2500.00	18000.00

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**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	1971.00	19220.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1971.00	19220.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 16  
(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
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**MILLENNIUM PHARMACEUTICALS INC PAC**

**A.**

Full Name (Last, First, Middle Initial) Kevin Carlin		Date of Receipt M - M / D - D / Y - Y - Y - Y 10 / 30 / 2008
Mailing Address Kevin Carlin 1909 Craig St		Transaction ID: 843
City Raleigh	State NC	Zip Code 27608
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 105.00
Name of Employer Millennium Pharmaceutical- s, Inc.	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1785.00	

**B.**

Full Name (Last, First, Middle Initial) Kevin Carlin		Date of Receipt M - M / D - D / Y - Y - Y - Y 11 / 15 / 2008
Mailing Address Kevin Carlin 1909 Craig St		Transaction ID: 844
City Raleigh	State NC	Zip Code 27608
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 105.00
Name of Employer Millennium Pharmaceutical- s, Inc.	Occupation Sales Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1785.00	

**C.**

Full Name (Last, First, Middle Initial) Patrick Connelly		Date of Receipt M - M / D - D / Y - Y - Y - Y 10 / 30 / 2008
Mailing Address Patrick Connelly 4 Oatsfield Circe		Transaction ID: 723
City Penfield	State NY	Zip Code 14526
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25.00
Name of Employer Millennium Pharmaceutical- s, Inc.	Occupation Sr. Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	235.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

28039951865

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

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

FOR LINE NUMBER: PAGE 7 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MILLENNIUM PHARMACEUTICALS INC PAC

**A.**

Full Name (Last, First, Middle Initial)  
Patrick Connelly

Mailing Address Patrick Connelly  
4 Oatsfield Circe

City Penfield State NY Zip Code 14526

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

Name of Employer Millennium Pharmaceutical-s, Inc. Occupation Sr. Manager

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 15 / 2008  
Transaction ID: 724  
Amount of Each Receipt this Period 25.00

**B.**

Full Name (Last, First, Middle Initial)  
Sandra DiCesare

Mailing Address Sandra DiCesare  
4 Shelly Lane

City Westford State MA Zip Code 01886

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

Name of Employer Millennium Pharmaceutical-s, Inc. Occupation VP Commercial Operations

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 10 / 30 / 2008  
Transaction ID: 804  
Amount of Each Receipt this Period 50.00

**C.**

Full Name (Last, First, Middle Initial)  
Sandra DiCesare

Mailing Address Sandra DiCesare  
4 Shelly Lane

City Westford State MA Zip Code 01886

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

Name of Employer Millennium Pharmaceutical-s, Inc. Occupation VP Commercial Operations

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 11 / 15 / 2008  
Transaction ID: 805  
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 125.00

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

28039951866

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

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

FOR LINE NUMBER: PAGE 8 / 16

(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

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NAME OF COMMITTEE (In Full)  
MILLENNIUM PHARMACEUTICALS INC PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Deborah Dunsire Mailing Address Deborah Dunsire 8 High Meadow Rd City Weslow State MA Zip Code 02493 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Millennium Pharmaceuticals, Inc. Occupation President & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3400.00	Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2008 Transaction ID: 914 Amount of Each Receipt this Period 200.00	
	Full Name (Last, First, Middle Initial) Deborah Dunsire Mailing Address Deborah Dunsire 8 High Meadow Rd City Weslow State MA Zip Code 02493 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Millennium Pharmaceuticals, Inc. Occupation President & CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3400.00	Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2008 Transaction ID: 915 Amount of Each Receipt this Period 200.00
	Full Name (Last, First, Middle Initial) Michael Eging Mailing Address Michael Eging 19741 Smith Circle City Ashburn State VA Zip Code 20147 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Millennium Pharmaceuticals, Inc. Occupation VP Government Relations Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3150.00	Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2008 Transaction ID: 896 Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ **550.00**

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

28039951867



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

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

FOR LINE NUMBER: PAGE 9 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MILLENNIUM PHARMACEUTICALS INC PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael Eging  
Mailing Address Michael Eging  
19741 Smith Circle  
City Ashburn State VA Zip Code 20147  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Millennium Pharmaceutical-s, Inc. Occupation VP Government Relations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3150.00  
Date of Receipt 11 / 15 / 2008  
Transaction ID: 897  
Amount of Each Receipt this Period 150.00

**B.** Full Name (Last, First, Middle Initial)  
Kathleen Ford  
Mailing Address Kathleen Ford  
211 North St  
City Medfield State MA Zip Code 02052  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Millennium Pharmaceutical-s, Inc. Occupation VP, Clinical Operations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 420.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: 697  
Amount of Each Receipt this Period 20.00

**C.** Full Name (Last, First, Middle Initial)  
Kathleen Ford  
Mailing Address Kathleen Ford  
211 North St  
City Medfield State MA Zip Code 02052  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Millennium Pharmaceutical-s, Inc. Occupation VP, Clinical Operations  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 420.00  
Date of Receipt 11 / 15 / 2008  
Transaction ID: 698  
Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 190.00  
TOTAL This Period (last page this line number only) ..... ▶

28039951868

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

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

FOR LINE NUMBER: PAGE 10 / 16

(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

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NAME OF COMMITTEE (In Full)  
MILLENNIUM PHARMACEUTICALS INC PAC

**A.**

Full Name (Last, First, Middle Initial) Tom Fussaro		Date of Receipt MM / DD / YYYY 11 / 15 / 2008
Mailing Address Tom Fussaro 4436 MacArthur Blvd NW #1A		Transaction ID: 1011
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Millennium Pharmaceutical- s, Inc.	Occupation Assoc. Dir Federal Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

**B.**

Full Name (Last, First, Middle Initial) Lynne Hunt		Date of Receipt MM / DD / YYYY 10 / 30 / 2008
Mailing Address Lynne Hunt 2029 Cahaba Crest Dr		Transaction ID: 734
City Bham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Millennium Pharmaceutical- s, Inc.	Occupation Sr. Oncology Sales Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

**C.**

Full Name (Last, First, Middle Initial) Lynne Hunt		Date of Receipt MM / DD / YYYY 11 / 15 / 2008
Mailing Address Lynne Hunt 2029 Cahaba Crest Dr		Transaction ID: 735
City Bham	State AL	Zip Code 35242
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Millennium Pharmaceutical- s, Inc.	Occupation Sr. Oncology Sales Specialist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) .....	70.00
TOTAL This Period (last page this line number only) .....	

28039951869

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

Use separate schedule(s)  
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)  
MILLENNIUM PHARMACEUTICALS INC PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Elizabeth Lewis</p> <p>Mailing Address Elizabeth Lewis 32 Cressbrook Rd</p> <p>City State Zip Code Concord MA 1742</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Millennium Pharmaceutical-s, Inc. Occupation VP, Commercial Law</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <input type="text" value="1050.00"/></p>	<p>Date of Receipt  <input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2008"/></p> <p>Transaction ID: 1081</p> <p>Amount of Each Receipt this Period  <input type="text" value="50.00"/></p>	
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Elizabeth Lewis</p> <p>Mailing Address Elizabeth Lewis 32 Cressbrook Rd</p> <p>City State Zip Code Concord MA 1742</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Millennium Pharmaceutical-s, Inc. Occupation VP, Commercial Law</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <input type="text" value="1050.00"/></p>	<p>Date of Receipt  <input type="text" value="11"/> / <input type="text" value="15"/> / <input type="text" value="2008"/></p> <p>Transaction ID: 1082</p> <p>Amount of Each Receipt this Period  <input type="text" value="50.00"/></p>	
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mary Ordal</p> <p>Mailing Address Mary Ordal 1435 York Ave #7c</p> <p>City State Zip Code New York NY 10075</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Millennium Pharmaceutical-s, Inc. Occupation Regional Sales Manager</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <input type="text" value="315.00"/></p>	<p>Date of Receipt  <input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2008"/></p> <p>Transaction ID: 1043</p> <p>Amount of Each Receipt this Period  <input type="text" value="15.00"/></p>	
<p>SUBTOTAL of Receipts This Page (optional) ..... ▶</p>		<p><input type="text" value="115.00"/></p>
<p>TOTAL This Period (last page this line number only) ..... ▶</p>		<p><input type="text" value=""/></p>

28039951870

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

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NAME OF COMMITTEE (In Full)  
**MILLENNIUM PHARMACEUTICALS INC PAC**

**A.**

Full Name (Last, First, Middle Initial) Mary Ordal	Date of Receipt MM / DD / YYYY 11 / 15 / 2008
Mailing Address Mary Ordal 1435 York Ave #7c	Transaction ID: 1044
City New York	State NY
Zip Code 10075	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C	
Name of Employer Millennium Pharmaceutical- s, Inc.	Occupation Regional Sales Manager
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00

**B.**

Full Name (Last, First, Middle Initial) Joe Regan	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
Mailing Address Joe Regan 3 Legion Road	Transaction ID: 825
City Weston	State MA
Zip Code 02493	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C	
Name of Employer Millennium Pharmaceutical- s, Inc.	Occupation VP, US Sales
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00

**C.**

Full Name (Last, First, Middle Initial) Joe Regan	Date of Receipt MM / DD / YYYY 11 / 15 / 2008
Mailing Address Joe Regan 3 Legion Road	Transaction ID: 826
City Weston	State MA
Zip Code 02493	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C	
Name of Employer Millennium Pharmaceutical- s, Inc.	Occupation VP, US Sales
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	115.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

28039951871

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

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

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

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NAME OF COMMITTEE (In Full)  
**MILLENNIUM PHARMACEUTICALS INC PAC**

**A.**

Full Name (Last, First, Middle Initial)  
Warren Rohal

Mailing Address Warren Rohal  
29655 Fran Drive

City State Zip Code  
Evergreen CO 80439

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

Name of Employer Millennium Pharmaceutical-s, Inc. Occupation Sr. Oncology Sales Specialist

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2008

Transaction ID: 637

Amount of Each Receipt this Period  
15.00

**B.**

Full Name (Last, First, Middle Initial)  
Warren Rohal

Mailing Address Warren Rohal  
29655 Fran Drive

City State Zip Code  
Evergreen CO 80439

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

Name of Employer Millennium Pharmaceutical-s, Inc. Occupation Sr. Oncology Sales Specialist

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 15 / 2008

Transaction ID: 638

Amount of Each Receipt this Period  
15.00

**C.**

Full Name (Last, First, Middle Initial)  
Mary Wadlinger

Mailing Address Mary Wadlinger  
19 Holly Ridge Rd

City State Zip Code  
N Andover MA 01845

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

Name of Employer Millennium Pharmaceutical-s, Inc. Occupation Sr. Director, Human Resources

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2008

Transaction ID: 657

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) ..... ▶

28059951872

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

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

FOR LINE NUMBER: PAGE 14 / 16  
(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

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NAME OF COMMITTEE (In Full)  
MILLENNIUM PHARMACEUTICALS INC PAC

A.

Full Name (Last, First, Middle Initial)  
Mary Wadlinger

Mailing Address Mary Wadlinger  
19 Holly Ridge Rd

City State Zip Code  
N Andover MA 01845

FEC ID number of contributing federal political committee.

C

Name of Employer  
Millennium Pharmaceutical-  
s, Inc.

Occupation  
Sr. Director, Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt

MM / DD / YYYY  
11 / 15 / 2008

Transaction ID: 658

Amount of Each Receipt this Period  
15.00

B.

Full Name (Last, First, Middle Initial)  
Michael Zdrojewski

Mailing Address Michael Zdrojewski  
57 Christian Way

City State Zip Code  
North Andover MA 01845

FEC ID number of contributing federal political committee.

C

Name of Employer  
Millennium Pharmaceutical-  
s, Inc.

Occupation  
Director, Sales Strategy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt

MM / DD / YYYY  
10 / 30 / 2008

Transaction ID: 710

Amount of Each Receipt this Period  
20.00

C.

Full Name (Last, First, Middle Initial)  
Michael Zdrojewski

Mailing Address Michael Zdrojewski  
57 Christian Way

City State Zip Code  
North Andover MA 01845

FEC ID number of contributing federal political committee.

C

Name of Employer  
Millennium Pharmaceutical-  
s, Inc.

Occupation  
Director, Sales Strategy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt

MM / DD / YYYY  
11 / 15 / 2008

Transaction ID: 711

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) ▶

1500.00

28039951873

**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)						PAGE 15 / 16
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)  
MILLENNIUM PHARMACEUTICALS INC PAC

A. Full Name (Last, First, Middle Initial)  
Lance for Congress

Mailing Address PO Box 225

City Colonia State NJ Zip Code 07067

Purpose of Disbursement

Candidate Name Leonard Lance

Office Sought:  House  Senate  President  
State: NJ District: 07

Transaction ID: 801A6F32-AE10-4F20-B

Date of Disbursement  
MM / DD / YYYY  
10 / 24 / 2008

Amount of Each Disbursement this Period  
1500.00

011  
Category/  
Type

Disbursement For:  Primary  General  Other (specify) ▼

28039951874

SUBTOTAL of Disbursements This Page (optional) .....	▶	1500.00
TOTAL This Period (last page this line number only) .....	▶	1500.00

**Federal Election Commission**  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt  
12/9/08

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*JmH*  
 PREPARER

12/5/08  
 DATE PREPARED

28039951875