

# 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  
PFIZER INC. PAC

ADDRESS (number and street) 235 EAST 42ND STREET  
Check if different than previously reported. (ACC) NEW YORK NY 10017

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00016683 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 M M M / D D D / 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 in the State of

5. Covering Period 04 / 01 / 2015 through 04 / 30 / 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 Mr. Joseph Gruber

Signature of Treasurer Mr. Joseph Gruber [Electronically Filed] Date 05 / 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**PFIZER 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="2015"/>		297750.75
(b) Cash on Hand at Beginning of Reporting Period.....	477944.88	
(c) Total Receipts (from Line 19) .....	121775.33	452600.03
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	599720.21	750350.78
7. Total Disbursements (from Line 31).....	85816.78	236447.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	513903.43	513903.43
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**PFIZER INC. PAC**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	60775.98	164254.82
(ii) Unitemized .....	60982.57	288272.86
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	121758.55	452527.68
(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) .....	121758.55	452527.68
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).....	16.78	72.35
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))..... ▶	121775.33	452600.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	121775.33	452600.03

**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 .....	16.78	222.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	16.78	222.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	59000.00	210000.00
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 .....	26800.00	26225.00
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)) ..	85816.78	236447.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	85816.78	236447.35

**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) .....	121758.55	452527.68
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	121758.55	452527.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	16.78	222.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	16.78	72.35
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	150.00

**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 6 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Eric Aaronson**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.72

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1711**

Amount of Each Receipt this Period  
25.84

Full Name (Last, First, Middle Initial)  
**B. Darci K. Aeder**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2010**

Amount of Each Receipt this Period  
100.00

Full Name (Last, First, Middle Initial)  
**C. Darci K. Aeder**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1999**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 225.84

**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 7 OF 254
	<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)  
**PFIZER INC. PAC**

**A. Gary Agisim**  
Full Name (Last, First, Middle Initial)

Mailing Address 1211 Sherwood Ave

City Richmond State VA Zip Code 23220-1212

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

Name of Employer Pfizer, Inc. Occupation PScientist Proc Development

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt **04 / 15 / 2015**

**Transaction ID : 2015041610395-3431**

Amount of Each Receipt this Period **41.67**

**B. Gary Agisim**  
Full Name (Last, First, Middle Initial)

Mailing Address 1211 Sherwood Ave

City Richmond State VA Zip Code 23220-1212

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

Name of Employer Pfizer, Inc. Occupation PScientist Proc Development

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : 20150504105459-3417**

Amount of Each Receipt this Period **41.67**

**C. Anne Michele F. Almeda**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 SIs Rep-Spec Ph

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **04 / 15 / 2015**

**Transaction ID : 2015041610395-532**

Amount of Each Receipt this Period **45.00**

**SUBTOTAL** of Receipts This Page (optional)..... **128.34**

**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 8 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Anne Michele F. Almeda**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Spec Ph  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 360.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-528**  
 Amount of Each Receipt this Period 45.00

**B. Mary Lou Ambrus**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation Executive Leadership  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 1666.64

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-2760**  
 Amount of Each Receipt this Period 208.33

**C. Mary Lou Ambrus**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation Executive Leadership  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 1666.64

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-2742**  
 Amount of Each Receipt this Period 208.33

**SUBTOTAL** of Receipts This Page (optional).....▶ 461.66  
**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: (check only one)	PAGE 9 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Susan C. Anderson**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Bus Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2342**

Amount of Each Receipt this Period  
41.67

**B. Susan C. Anderson**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Bus Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2329**

Amount of Each Receipt this Period  
41.67

**C. Andrew Thomas Antrobus**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1986**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional).....▶ 187.51

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Andrew Thomas Antrobus</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1975</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 833.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation SrDirector Worldwide Policy	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Kirsten J. Axelsen Carmel</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1697</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 833.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation VPresident Public Affairs	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Kirsten J. Axelsen Carmel</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1687</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 833.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation VPresident Public Affairs	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	312.51
<b>TOTAL</b> This Period (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 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Salomon Azoulay**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-1784**

Amount of Each Receipt this Period  
 104.17

Full Name (Last, First, Middle Initial)  
**B. Salomon Azoulay**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-1774**

Amount of Each Receipt this Period  
 104.17

Full Name (Last, First, Middle Initial)  
**C. Indranil Bagchi**

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-2466**

Amount of Each Receipt this Period  
 41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.01

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Indranil Bagchi**

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer Inc Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-2450**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**B. Francis G. Barnette**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City State Zip Code  
Atlanta GA 30338-7503

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

Name of Employer Occupation  
Pfizer Inc Director Reg Mgmt Pharma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-1051**

Amount of Each Receipt this Period  
52.00

Full Name (Last, First, Middle Initial)  
**C. Francis G. Barnette**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City State Zip Code  
Atlanta GA 30338-7503

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

Name of Employer Occupation  
Pfizer Inc Director Reg Mgmt Pharma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
416.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-1043**

Amount of Each Receipt this Period  
52.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 145.67

**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:	PAGE 13 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Elizabeth Barrett**

Mailing Address Dorking Road

City Tadworth State SU Zip Code KT207NS

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

Name of Employer Pfizer International Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-8**

Amount of Each Receipt this Period  
208.33

Full Name (Last, First, Middle Initial)  
**B. Elizabeth Barrett**

Mailing Address Dorking Road

City Tadworth State SU Zip Code KT207NS

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

Name of Employer Pfizer International Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-8**

Amount of Each Receipt this Period  
208.33

Full Name (Last, First, Middle Initial)  
**C. James A. Baumann**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pharmacia & Upjohn Company Occupation Sales/AM-5 Ar/RegAcMgtPhar

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-182**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 458.33

**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: (check only one)	PAGE 14 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. James A. Baumann**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pharmacia & Upjohn Company Occupation Sales/AM-5 Ar/RegAcMgtPhar

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-181**

Amount of Each Receipt this Period  
41.67

**B. Amy Baumbach**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sales/AM-5 Nat'lKeyActPharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-665**

Amount of Each Receipt this Period  
26.00

**C. Janice M. Beauchamp**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive HR Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1036**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional).....▶ 171.84

**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:	PAGE 15 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Janice M. Beauchamp</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.		Transaction ID : <b>20150504105459-1028</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="104.17"/>
Name of Employer	Occupation	
Pfizer Inc	Executive HR Leadership	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="833.36"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Heather L. Behnken</b>		Date of Receipt
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
Atlanta	GA	30338-7503
FEC ID number of contributing federal political committee.		Transaction ID : <b>2015041610395-189</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="60.00"/>
Name of Employer	Occupation	
Pharmacia & Upjohn Company	Sr Manager Dist Mgmt-Pharm	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="480.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Heather L. Behnken</b>		Date of Receipt
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
Atlanta	GA	30338-7503
FEC ID number of contributing federal political committee.		Transaction ID : <b>20150504105459-188</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="60.00"/>
Name of Employer	Occupation	
Pharmacia & Upjohn Company	Sr Manager Dist Mgmt-Pharm	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="480.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="224.17"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Lisa Bellucci**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc SrDirector Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**833.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-2291**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**B. Lisa Bellucci**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc SrDirector Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**833.36**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-2279**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**C. Patricia C. Bender**

Mailing Address 1100 N Arlington Heights Rd  
Ste 400

City State Zip Code  
Itasca IL 60143-3111

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

Name of Employer Occupation  
Pfizer Inc Sales/AM-3 SIs Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**333.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-1726**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **250.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Patricia C. Bender**

Mailing Address 1100 N Arlington Heights Rd  
Ste 400

City Itasca State IL Zip Code 60143-3111

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1716**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**B. Luann Binda**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pharmacia & Upjohn Company Occupation Director Bus Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-67**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**C. Luann Binda**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pharmacia & Upjohn Company Occupation Director Bus Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-66**

Amount of Each Receipt this Period  
**41.67**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>125.01</b>
<b>TOTAL</b> This Period (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 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Melissa L. Bishop-Murphy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation SrDirector Worldwide Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-1433**  
 Amount of Each Receipt this Period 104.17

**B. Melissa L. Bishop-Murphy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation SrDirector Worldwide Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-1424**  
 Amount of Each Receipt this Period 104.17

**C. Richard Blackburn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation Executive Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 729.19

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-1821**  
 Amount of Each Receipt this Period 104.17

**SUBTOTAL** of Receipts This Page (optional).....▶ 312.51  
**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 Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Margaret I. Bloch**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1492**

Amount of Each Receipt this Period  
55.00

Full Name (Last, First, Middle Initial)  
**B. Margaret I. Bloch**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1483**

Amount of Each Receipt this Period  
55.00

Full Name (Last, First, Middle Initial)  
**C. Barbara Bonfiglio**

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation SrDirector Platform Support

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2429**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 214.17

**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 20 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Barbara Bonfiglio</b>		Date of Receipt
Mailing Address Pfizer Inc Corporate Affairs/Govt Relatns		M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 20150504105459-2416</b>
Name of Employer Pfizer Inc		Amount of Each Receipt this Period
Occupation SrDirector Platform Support		104.17
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	833.36	

Full Name (Last, First, Middle Initial) <b>B. Keith D. Borgschatz</b>		Date of Receipt
Mailing Address 18500 Von Karman Ave		M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015
City Irvine	State CA	Zip Code 92612-0504
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 2015041610395-347</b>
Name of Employer Pharmacia & Upjohn Company		Amount of Each Receipt this Period
Occupation Sr Manager Worldwide Policy		42.67
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	341.36	

Full Name (Last, First, Middle Initial) <b>C. Keith D. Borgschatz</b>		Date of Receipt
Mailing Address 18500 Von Karman Ave		M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015
City Irvine	State CA	Zip Code 92612-0504
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID : 20150504105459-344</b>
Name of Employer Pharmacia & Upjohn Company		Amount of Each Receipt this Period
Occupation Sr Manager Worldwide Policy		42.67
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	341.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	189.51
<b>TOTAL</b> This Period (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 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Lynn A. Bottone**  
Full Name (Last, First, Middle Initial)

Mailing Address 4300 Oak Park Rd

City Sanford State NC Zip Code 27330-9550

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

Name of Employer Pfizer, Inc. Occupation SrDirector Leadership

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt **04 / 15 / 2015**

**Transaction ID : 2015041610395-3344**

Amount of Each Receipt this Period **104.17**

**B. Lynn A. Bottone**  
Full Name (Last, First, Middle Initial)

Mailing Address 4300 Oak Park Rd

City Sanford State NC Zip Code 27330-9550

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

Name of Employer Pfizer, Inc. Occupation SrDirector Leadership

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : 20150504105459-3330**

Amount of Each Receipt this Period **104.17**

**C. Albert Bourla**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive TopDivBusLdr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1666.64**

Date of Receipt **04 / 15 / 2015**

**Transaction ID : 2015041610395-1694**

Amount of Each Receipt this Period **208.33**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **416.67**

**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:	PAGE 22 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Albert Bourla**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc Executive TopDivBusLdr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1684**

Amount of Each Receipt this Period  
208.33

Full Name (Last, First, Middle Initial)  
**B. Joseph J. Bowsher**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer, Inc. VPresident Brand/Prod Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-3141**

Amount of Each Receipt this Period  
208.33

Full Name (Last, First, Middle Initial)  
**C. Joseph J. Bowsher**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer, Inc. VPresident Brand/Prod Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-3127**

Amount of Each Receipt this Period  
208.33

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	624.99
<b>TOTAL</b> This Period (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 23 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Karen Boykin-Towns**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.72

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-862**

Amount of Each Receipt this Period  
208.34

**B. Karen Boykin-Towns**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.72

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-855**

Amount of Each Receipt this Period  
208.34

**C. Tiffini K. Brabham**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 Burt Rd

City Andover State MA Zip Code 01810-5901

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

Name of Employer Pfizer Inc Occupation A.R.Fellow Pharmacology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-541**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.85

**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: (check only one)	PAGE 24 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Tiffini K. Brabham**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 Burt Rd

City Andover State MA Zip Code 01810-5901

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

Name of Employer Pfizer Inc Occupation A.R.Fellow Pharmacology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-537**

Amount of Each Receipt this Period  
**104.17**

**B. Kenneth A. Bradley**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 Burt Rd

City Andover State MA Zip Code 01810-5901

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

Name of Employer Pfizer Inc Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-771**

Amount of Each Receipt this Period  
**30.00**

**C. Kenneth A. Bradley**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 Burt Rd

City Andover State MA Zip Code 01810-5901

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

Name of Employer Pfizer Inc Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-764**

Amount of Each Receipt this Period  
**30.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **164.17**

**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 25 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Jeffrey P. Brand</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-786</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 50.00
City New York	State NY	
Zip Code 10017-5703		Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director LdrshpColComms	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>B. Jeffrey P. Brand</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-779</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 50.00
City New York	State NY	
Zip Code 10017-5703		Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director LdrshpColComms	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C. Mitchell T. Bratton</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2202</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State GA	
Zip Code 30338-7503		Amount of Each Receipt this Period 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Sales/AM-5 Ar/RegAcMgtPhar	Amount of Each Receipt this Period 333.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	141.67
<b>TOTAL</b> This Period (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 26 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Mitchell T. Bratton**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-5 Ar/RegAcMgtPhar

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-2191**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**B. Rebecca S. Brosche**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Sales/AM-5 Nat'lKeyActPharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-1217**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**C. Rebecca S. Brosche**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Sales/AM-5 Nat'lKeyActPharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1210**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **125.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Darris L. Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1799**

Amount of Each Receipt this Period  
41.67

**B. Darris L. Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1789**

Amount of Each Receipt this Period  
41.67

**C. Joshua Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2691**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 187.51

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Joshua Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2673**

Amount of Each Receipt this Period  
104.17

**B. Albert M. Bruce Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer, Inc. Occupation VPresident Comm Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-3146**

Amount of Each Receipt this Period  
47.50

**C. Albert M. Bruce Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer, Inc. Occupation VPresident Comm Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-3132**

Amount of Each Receipt this Period  
47.50

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 199.17

**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 29 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Virginia Buckingham**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-2564**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**B. Virginia Buckingham**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-2548**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**C. Mark Budaj**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Fin'l Plan&Anal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-2822**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... **250.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Mark Budaj</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.		<b>Transaction ID : 20150504105459-2805</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="41.67"/>
Name of Employer	Occupation	
Pfizer Inc	Director Fin'l Plan&Anal	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="333.36"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Solange Bueno</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2015041610395-893</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="104.17"/>
Name of Employer	Occupation	
Pfizer Inc	SrDirector HR Lead	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="833.36"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Solange Bueno</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.		<b>Transaction ID : 20150504105459-887</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="104.17"/>
Name of Employer	Occupation	
Pfizer Inc	SrDirector HR Lead	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="833.36"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="250.01"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 31 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Paula Burg**  
Full Name (Last, First, Middle Initial)

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-3043**

Amount of Each Receipt this Period  
**104.17**

**B. Paula Burg**  
Full Name (Last, First, Middle Initial)

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-3026**

Amount of Each Receipt this Period  
**104.17**

**C. Beth S. Burnett**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pharmacia & Upjohn Company Occupation Sales/AM-5 Ar/RegAcMgtPhar

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-137**

Amount of Each Receipt this Period  
**55.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **263.34**

**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 32 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Beth S. Burnett**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pharmacia & Upjohn Company Occupation Sales/AM-5 Ar/RegAcMgtPhar

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-136**

Amount of Each Receipt this Period  
55.00

**B. Amy L. Butters**  
Full Name (Last, First, Middle Initial)

Mailing Address 4300 Oak Park Rd

City Sanford State NC Zip Code 27330-9550

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

Name of Employer Pfizer, Inc. Occupation Sr Manager BU Communication

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-3349**

Amount of Each Receipt this Period  
104.17

**C. Amy L. Butters**  
Full Name (Last, First, Middle Initial)

Mailing Address 4300 Oak Park Rd

City Sanford State NC Zip Code 27330-9550

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

Name of Employer Pfizer, Inc. Occupation Sr Manager BU Communication

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-3335**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 263.34

**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 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Brian Byala**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**  
**Transaction ID : 2015041610395-907**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**B. Brian Byala**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-900**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**C. Jon W. Cain**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **278.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**  
**Transaction ID : 2015041610395-995**

Amount of Each Receipt this Period  
**34.75**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **243.09**

**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: (check only one)	PAGE 34 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Jon W. Cain**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
278.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-987**

Amount of Each Receipt this Period  
34.75

**B. Tanya M. Carr-Waldron**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector BusUnitSupport

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1524**

Amount of Each Receipt this Period  
41.67

**C. Tanya M. Carr-Waldron**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector BusUnitSupport

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1515**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 118.09

**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: (check only one)	PAGE 35 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. G. Milo Caskey**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-1649**

Amount of Each Receipt this Period  
**41.67**

**B. G. Milo Caskey**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **2015050410545-1639**

Amount of Each Receipt this Period  
**41.67**

**C. Sharon J. Castillo**  
Full Name (Last, First, Middle Initial)

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation Director BU Communication

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-2944**

Amount of Each Receipt this Period  
**104.17**

**SUBTOTAL** of Receipts This Page (optional)..... **187.51**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Sharon J. Castillo**

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation Director BU Communication

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-2928**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**B. Jeffrey B. Chasnow**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**  
**Transaction ID : 2015041610395-923**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**C. Jeffrey B. Chasnow**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-916**

Amount of Each Receipt this Period  
**104.17**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>312.51</b>
<b>TOTAL</b> This Period (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 37 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Laura Chenoweth**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1021**

Amount of Each Receipt this Period  
104.17

**B. Laura Chenoweth**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1013**

Amount of Each Receipt this Period  
104.17

**C. Victor M. Clavelli**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Comm Bus Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1321**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional).....▶ 250.01

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 254
	<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)  
**PFIZER INC. PAC**

**A. Victor M. Clavelli**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation VPresident Comm Bus Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-1313**  
 Amount of Each Receipt this Period  
 41.67

**B. Tanya C. Clemons**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Executive HR Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-2608**  
 Amount of Each Receipt this Period  
 104.17

**C. Tanya C. Clemons**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Executive HR Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-2590**  
 Amount of Each Receipt this Period  
 104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.01  
**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 Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Steven R. Cohen</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-3490</b>
Mailing Address 5 Giralda Farms		Amount of Each Receipt this Period 42.00
City Madison	State NJ	Zip Code 07940-1027
FEC ID number of contributing federal political committee. C	Name of Employer Pfizer, Inc.	Occupation VPresident Brand/Prod Mgmt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

Full Name (Last, First, Middle Initial) <b>B. Steven R. Cohen</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-3475</b>
Mailing Address 5 Giralda Farms		Amount of Each Receipt this Period 42.00
City Madison	State NJ	Zip Code 07940-1027
FEC ID number of contributing federal political committee. C	Name of Employer Pfizer, Inc.	Occupation VPresident Brand/Prod Mgmt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

Full Name (Last, First, Middle Initial) <b>C. Kenneth Cole</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2807</b>
Mailing Address Pfizer Inc Corporate Affairs/Govt Relatns		Amount of Each Receipt this Period 208.33
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C	Name of Employer Pfizer Inc	Occupation Executive Leadership
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.64	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	292.33
<b>TOTAL</b> This Period (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 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Kenneth Cole</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-2790</b>
Mailing Address Pfizer Inc Corporate Affairs/Govt Relatns		Amount of Each Receipt this Period 208.33
City Washington	State DC	
Zip Code 20004		Aggregate Year-to-Date ▼ 1666.64
FEC ID number of contributing federal political committee. C	Occupation Executive Leadership	
Name of Employer Pfizer Inc	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Sheryl Colyer</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2684</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 833.36
FEC ID number of contributing federal political committee. C	Occupation VPresident HR Lead	
Name of Employer Pfizer Inc	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>c. Sheryl Colyer</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-2666</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 833.36
FEC ID number of contributing federal political committee. C	Occupation VPresident HR Lead	
Name of Employer Pfizer Inc	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	416.67
<b>TOTAL</b> This Period (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 41 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Eileen A. Combos**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.02

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-477**

Amount of Each Receipt this Period  
41.67

**B. Eileen A. Combos**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.02

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-475**

Amount of Each Receipt this Period  
41.67

**C. Jim Connell**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer U.S. Pharmaceuticals Occupation Sales/AM-2 SIs Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.35

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1802**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.01

**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 Page

FOR LINE NUMBER: PAGE 42 OF 254  
(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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Keith J. Connell**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation SrDirector Reg Mgmt Pharma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1423**

Amount of Each Receipt this Period  
26.00

Full Name (Last, First, Middle Initial)  
**B. Christine L. Corbett-Parsons**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer, Inc. Occupation SrDirector Client Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-3113**

Amount of Each Receipt this Period  
75.00

Full Name (Last, First, Middle Initial)  
**C. Christine L. Corbett-Parsons**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer, Inc. Occupation SrDirector Client Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-3099**

Amount of Each Receipt this Period  
75.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 176.00

**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 43 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. W. Don Cornwell**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St

City New York State NY Zip Code 10017-5703

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 653D4A77DF534FB29994**

Amount of Each Receipt this Period  
 1250.00

**B. Ben Coronado Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1100 N Arlington Heights Rd Ste 400

City Itasca State IL Zip Code 60143-3111

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

Name of Employer Occupation  
Pfizer Inc Sr Manager Dist Mgmt-Pharm

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  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-2140**

Amount of Each Receipt this Period  
 27.00

**C. Susan Courson-Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 6730 Lenox Center Ct Ste 300

City Memphis State TN Zip Code 38115-4289

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

Name of Employer Occupation  
Pfizer Inc SrDirector Tax Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-2543**

Amount of Each Receipt this Period  
 41.67

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1318.67
<b>TOTAL</b> This Period (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 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Paul Cristello**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Mkt Analyt&MgtSci

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-950**

Amount of Each Receipt this Period  
41.67

**B. Paul Cristello**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Mkt Analyt&MgtSci

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-943**

Amount of Each Receipt this Period  
41.67

**C. Vincent J. Croci**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1238**

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 113.34

**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 46 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Christopher J. Crosby**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-617**  
 Amount of Each Receipt this Period 41.67

**B. Christopher J. Crosby**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-611**  
 Amount of Each Receipt this Period 41.67

**C. Julia M. Cumberbatch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 Giralda Farms  
 City Madison State NJ Zip Code 07940-1027  
 Name of Employer Pfizer, Inc. Occupation VPresident Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-3102**  
 Amount of Each Receipt this Period 104.17

**SUBTOTAL** of Receipts This Page (optional).....▶ 187.51  
**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 Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Julia M. Cumberbatch</b>		Date of Receipt
Mailing Address 5 Giralda Farms		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
Madison	NJ	07940-1027
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150504105459-3088</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pfizer, Inc.	VPresident Leadership	<input type="text" value="104.17"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="833.36"/>	

Full Name (Last, First, Middle Initial) <b>B. Frank A. D'Amelio</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2015041610395-2591</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pfizer Inc	Executive CFO	<input type="text" value="104.17"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="833.36"/>	

Full Name (Last, First, Middle Initial) <b>C. Frank A. D'Amelio</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150504105459-2574</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pfizer Inc	Executive CFO	<input type="text" value="104.17"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="833.36"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="312.51"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 48 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Ramzi Dagher**

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-2675**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**B. Ramzi Dagher**

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-2657**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**C. Patricia Jill Dailey**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-2875**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... **250.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Patricia Jill Dailey**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2858**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**B. Amanda Josephson Daniels**

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer, Inc. Occupation Director Brand/Prod Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-3164**

Amount of Each Receipt this Period  
60.00

Full Name (Last, First, Middle Initial)  
**C. Amanda Josephson Daniels**

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer, Inc. Occupation Director Brand/Prod Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-3150**

Amount of Each Receipt this Period  
60.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 161.67

**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:	PAGE 50 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. John William Dauser II</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-488</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State GA	Zip Code 30338-7503
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Sr Manager Dist Mgmt-Pharm	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name (Last, First, Middle Initial) <b>B. John William Dauser II</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-486</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State GA	Zip Code 30338-7503
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Sr Manager Dist Mgmt-Pharm	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name (Last, First, Middle Initial) <b>C. Robin R. DeLoach</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-2004</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	Zip Code 30338-7503
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Sales/AM-2 Sls Rep-Spec Ph	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	133.34
<b>TOTAL</b> This Period (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 51 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Joseph J. Delosa**  
Full Name (Last, First, Middle Initial)

Mailing Address 977 Anderson Hill Rd

City Rye Brook State NY Zip Code 10573-5412

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

Name of Employer Pfizer Inc Occupation Sr Manager STrngCuri/ConD-P

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-562**

Amount of Each Receipt this Period  
 55.00

**B. Joseph J. Delosa**  
Full Name (Last, First, Middle Initial)

Mailing Address 977 Anderson Hill Rd

City Rye Brook State NY Zip Code 10573-5412

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

Name of Employer Pfizer Inc Occupation Sr Manager STrngCuri/ConD-P

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-558**

Amount of Each Receipt this Period  
 55.00

**C. James J. Demay**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-2910**

Amount of Each Receipt this Period  
 104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 214.17

**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 52 OF 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. James J. Demay**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-2894**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**B. Michael C. Deminski**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pharmacia & Upjohn Company Occupation SrDirector FldMedMedLiasNMD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**  
**Transaction ID : 2015041610395-93**

Amount of Each Receipt this Period  
**30.00**

Full Name (Last, First, Middle Initial)  
**C. Michael C. Deminski**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pharmacia & Upjohn Company Occupation SrDirector FldMedMedLiasNMD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-92**

Amount of Each Receipt this Period  
**30.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **164.17**

**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 53 OF 254
	<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)  
**PFIZER INC. PAC**

**A. Keith S. Dennie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation VPresident Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-1975**  
 Amount of Each Receipt this Period  
 104.17

**B. Keith S. Dennie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation VPresident Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-1964**  
 Amount of Each Receipt this Period  
 104.17

**C. Louis DePaolis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 401 N Middletown Rd  
 City Pearl River State NY Zip Code 10965-1298  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Director Apps Hosting  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-2474**  
 Amount of Each Receipt this Period  
 41.67

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.01
<b>TOTAL</b> This Period (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 54 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Louis DePaolis**  
Full Name (Last, First, Middle Initial)

Mailing Address 401 N Middletown Rd

City Pearl River State NY Zip Code 10965-1298

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

Name of Employer Pfizer Inc Occupation Director Apps Hosting

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2458**

Amount of Each Receipt this Period  
**41.67**

**B. Renee Allen Di Stefano**  
Full Name (Last, First, Middle Initial)

Mailing Address 1100 N Arlington Heights Rd Ste 400

City Itasca State IL Zip Code 60143-3111

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1688**

Amount of Each Receipt this Period  
**41.67**

**C. Renee Allen Di Stefano**  
Full Name (Last, First, Middle Initial)

Mailing Address 1100 N Arlington Heights Rd Ste 400

City Itasca State IL Zip Code 60143-3111

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1678**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **125.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Lindsey M. Dietschi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation SrDirector Worldwide Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-2109**  
 Amount of Each Receipt this Period  
 104.17

**B. Lindsey M. Dietschi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation SrDirector Worldwide Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-2098**  
 Amount of Each Receipt this Period  
 104.17

**C. G. Mikael Dolsten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer, Inc. Occupation Executive Top R&D Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1458.38

Date of Receipt  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-3168**  
 Amount of Each Receipt this Period  
 208.34

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	416.68
<b>TOTAL</b> This Period (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 56 OF 254
	<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)  
**PFIZER INC. PAC**

**A. G. Mikael Dolsten**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer, Inc. Occupation Executive Top R&D Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1458.38

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-3154**  
 Amount of Each Receipt this Period  
 208.34

**B. Erling Thor Donnelly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 Fawcett St  
 City Cambridge State MA Zip Code 02138-1171  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation SrDirector ClinResClinicMD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-2640**  
 Amount of Each Receipt this Period  
 41.67

**C. Erling Thor Donnelly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 Fawcett St  
 City Cambridge State MA Zip Code 02138-1171  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation SrDirector ClinResClinicMD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-2622**  
 Amount of Each Receipt this Period  
 41.67

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	291.68
<b>TOTAL</b> This Period (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 57 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Samuel L. Dowell**

Mailing Address 100 Route 206 North

City Peapack	State NJ	Zip Code 07977
-----------------	-------------	-------------------

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

Name of Employer Pfizer Inc	Occupation VPresident Leadership
--------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

**Transaction ID : 2015041610395-1283**

Amount of Each Receipt this Period  

50.00
-------

Full Name (Last, First, Middle Initial)  
**B. Samuel L. Dowell**

Mailing Address 100 Route 206 North

City Peapack	State NJ	Zip Code 07977
-----------------	-------------	-------------------

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

Name of Employer Pfizer Inc	Occupation VPresident Leadership
--------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

**Transaction ID : 20150504105459-1276**

Amount of Each Receipt this Period  

50.00
-------

Full Name (Last, First, Middle Initial)  
**C. Michael D. Dowis**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta	State GA	Zip Code 30338-7503
-----------------	-------------	------------------------

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

Name of Employer Pfizer Inc	Occupation Sr Manager Worldwide Policy
--------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

**Transaction ID : 2015041610395-1202**

Amount of Each Receipt this Period  

104.17
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>204.17</b>
<b>TOTAL</b> This Period (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 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Michael D. Dowis**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1195**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**B. Deborah Driscoll**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-743**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**C. Deborah Driscoll**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-736**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 312.51

**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 Page	FOR LINE NUMBER:	PAGE 59 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. James Robert Driscoll</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-3054</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		FEC ID number of contributing federal political committee. C
Name of Employer Pfizer Inc		
Occupation Director Worldwide Policy		Aggregate Year-to-Date ▼ 833.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. James Robert Driscoll</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-3037</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		FEC ID number of contributing federal political committee. C
Name of Employer Pfizer Inc		
Occupation Director Worldwide Policy		Aggregate Year-to-Date ▼ 833.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Richard C. Dudek</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1273</b>
Mailing Address 1100 N Arlington Heights Rd Ste 400		Amount of Each Receipt this Period 26.00
City Itasca	State IL	
Zip Code 60143-3111		FEC ID number of contributing federal political committee. C
Name of Employer Pfizer Inc		
Occupation SrDirector Reg Mgmt Pharma		Aggregate Year-to-Date ▼ 208.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	234.34
<b>TOTAL</b> This Period (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 60 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Jeff Dufour</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1876</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 42.00
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 336.00
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation VPresident Brand/Prod Mgmt	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Jeff Dufour</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1866</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 42.00
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 336.00
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation VPresident Brand/Prod Mgmt	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Drue Duncan</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2567</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 833.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director Worldwide Policy	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	188.17
<b>TOTAL</b> This Period (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 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Drue Duncan**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2551**

Amount of Each Receipt this Period  
**104.17**

**B. Michael P. Dunn**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1632**

Amount of Each Receipt this Period  
**41.67**

**C. Michael P. Dunn**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1622**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... **187.51**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Shayla M. Ebner</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-350</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State GA Zip Code 30338-7503	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 333.36
Name of Employer Pharmacia & Upjohn Company	Occupation Sales/AM-3 Sls Rep-Pcare Ph	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>B. Shayla M. Ebner</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-347</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State GA Zip Code 30338-7503	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 333.36
Name of Employer Pharmacia & Upjohn Company	Occupation Sales/AM-3 Sls Rep-Pcare Ph	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C. James Thomas Elliott</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-702</b>
Mailing Address 100 Route 206 North		Amount of Each Receipt this Period 60.00
City Peapack	State NJ Zip Code 07977	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 480.00
Name of Employer Pfizer Inc	Occupation SrDirector SupplyChainPlan	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	143.34
<b>TOTAL</b> This Period (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 254  
(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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. James Thomas Elliott**

Mailing Address 100 Route 206 North

City State Zip Code  
Peapack NJ 07977

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

Name of Employer Occupation  
Pfizer Inc SrDirector SupplyChainPlan

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-695**

Amount of Each Receipt this Period  
 60.00

Full Name (Last, First, Middle Initial)  
**B. Warachal Eileen Faison**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc Director ClinResClinicMD

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-2678**

Amount of Each Receipt this Period  
 41.67

Full Name (Last, First, Middle Initial)  
**C. Warachal Eileen Faison**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc Director ClinResClinicMD

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-2660**

Amount of Each Receipt this Period  
 41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 143.34

**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 64 OF 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Michele A. Farber**

Mailing Address 5 Giralda Farms

City Madison	State NJ	Zip Code 07940-1027
-----------------	-------------	------------------------

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

Name of Employer Pfizer, Inc.	Occupation SrDirector Trdmrks/Copyrights
----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 15 / 2015**  
**Transaction ID : 2015041610395-3546**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**B. Michele A. Farber**

Mailing Address 5 Giralda Farms

City Madison	State NJ	Zip Code 07940-1027
-----------------	-------------	------------------------

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

Name of Employer Pfizer, Inc.	Occupation SrDirector Trdmrks/Copyrights
----------------------------------	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-3530**

Amount of Each Receipt this Period  
**50.00**

Full Name (Last, First, Middle Initial)  
**C. Frances Fergusson**

Mailing Address 235 E 42nd St

City New York	State NY	Zip Code 10017-5703
------------------	-------------	------------------------

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

Name of Employer Pfizer, Inc.	Occupation Director
----------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 10A957E19A30429BAB05**

Amount of Each Receipt this Period  
**250.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>350.00</b>
<b>TOTAL</b> This Period (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 65 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. F. Owen Fields**  
Full Name (Last, First, Middle Initial)  
Mailing Address 500 Arcola Rd

City Collegeville	State PA	Zip Code 19426-3982
----------------------	-------------	------------------------

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

Name of Employer Pfizer, Inc.	Occupation VPresident Leadership
----------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

**Transaction ID : 2015041610395-3174**

Amount of Each Receipt this Period  

41.67
-------

**B. F. Owen Fields**  
Full Name (Last, First, Middle Initial)  
Mailing Address 500 Arcola Rd

City Collegeville	State PA	Zip Code 19426-3982
----------------------	-------------	------------------------

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

Name of Employer Pfizer, Inc.	Occupation VPresident Leadership
----------------------------------	-------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

**Transaction ID : 20150504105459-3160**

Amount of Each Receipt this Period  

41.67
-------

**C. Leonard E. Figorski**  
Full Name (Last, First, Middle Initial)  
Mailing Address 500 Arcola Rd

City Collegeville	State PA	Zip Code 19426-3982
----------------------	-------------	------------------------

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

Name of Employer Pfizer, Inc.	Occupation Sr Manager Pkg Project Eng
----------------------------------	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

**Transaction ID : 2015041610395-3175**

Amount of Each Receipt this Period  

41.67
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>125.01</b>
<b>TOTAL</b> This Period (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 66 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Leonard E. Figorski</b>		Date of Receipt 04 / 30 / 2015 <b>Transaction ID : 20150504105459-3161</b>
Mailing Address 500 Arcola Rd		Amount of Each Receipt this Period 41.67
City Collegeville	State PA	Zip Code 19426-3982
FEC ID number of contributing federal political committee. C	Name of Employer Pfizer, Inc.	
Occupation Sr Manager Pkg Project Eng		Aggregate Year-to-Date ▼ 333.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Javier Figueroa Gonzalez</b>		Date of Receipt 04 / 15 / 2015 <b>Transaction ID : 2015041610395-3325</b>
Mailing Address State Road North 3 Km 142.1		Amount of Each Receipt this Period 41.67
City Guayama	State PR	Zip Code 00784
FEC ID number of contributing federal political committee. C	Name of Employer Pfizer Pharmaceuticals LLC	
Occupation SrDirector HR Lead		Aggregate Year-to-Date ▼ 333.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Javier Figueroa Gonzalez</b>		Date of Receipt 04 / 30 / 2015 <b>Transaction ID : 20150504105459-3311</b>
Mailing Address State Road North 3 Km 142.1		Amount of Each Receipt this Period 41.67
City Guayama	State PR	Zip Code 00784
FEC ID number of contributing federal political committee. C	Name of Employer Pfizer Pharmaceuticals LLC	
Occupation SrDirector HR Lead		Aggregate Year-to-Date ▼ 333.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (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 67 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Steven A. First**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer, Inc. Occupation VPresident Benefits

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**  
**Transaction ID : 2015041610395-3552**

Amount of Each Receipt this Period  
**42.00**

Full Name (Last, First, Middle Initial)  
**B. Steven A. First**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer, Inc. Occupation VPresident Benefits

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-3536**

Amount of Each Receipt this Period  
**42.00**

Full Name (Last, First, Middle Initial)  
**C. Christopher Fleischman**

Mailing Address 100 Route 206 North

City Peapack State NJ Zip Code 07977

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

Name of Employer Pfizer Inc Occupation Director Tax Planning

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**  
**Transaction ID : 2015041610395-3010**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **125.67**

**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 68 OF 254
	<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)  
**PFIZER INC. PAC**

**A. Christopher Fleischman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Route 206 North  
 City Peapack State NJ Zip Code 07977  
 Name of Employer Pfizer Inc Occupation Director Tax Planning  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-2993**  
 Amount of Each Receipt this Period 41.67

**B. Shelby D. Fletcher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation Director Worldwide Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-1473**  
 Amount of Each Receipt this Period 104.17

**C. Shelby D. Fletcher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation Director Worldwide Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-1464**  
 Amount of Each Receipt this Period 104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.01  
**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 Page	FOR LINE NUMBER:	PAGE 69 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Merrill E. Fliederbaum</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2015041610395-966</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="41.67"/>
Name of Employer	Occupation	
Pfizer Inc	SrDirector Platform Support	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="333.36"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Merrill E. Fliederbaum</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.		<b>Transaction ID : 20150504105459-958</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="41.67"/>
Name of Employer	Occupation	
Pfizer Inc	SrDirector Platform Support	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="333.36"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Tracy L. Frary</b>		Date of Receipt
Mailing Address 500 Arcola Rd		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
Collegeville	PA	19426-3982
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2015041610395-2809</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
Pfizer Inc	SrDirector Comm Development	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="133.34"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Tracy L. Fray**

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer Inc SrDirector Comm Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2792**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. Nancy B. Friedman**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1560**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**C. Nancy B. Friedman**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1549**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 133.34

**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 71 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Terence Fullerton</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1765</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 41.67
City Groton	State CT Zip Code 06340-5146	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 333.36
Name of Employer Pfizer Inc	Occupation SrDirector ClinResClinNMD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Terence Fullerton</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1755</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 41.67
City Groton	State CT Zip Code 06340-5146	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 333.36
Name of Employer Pfizer Inc	Occupation SrDirector ClinResClinNMD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mario A. Gagliano</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2099</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 41.67
City New York	State NY Zip Code 10017-5703	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼ 333.36
Name of Employer Pfizer Inc	Occupation VPresident HR Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (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 72 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Mario A. Gagliano**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident HR Lead

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-2088**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**B. Timothy Gallagher**

Mailing Address 1100 N Arlington Heights Rd  
Ste 400

City Itasca State IL Zip Code 60143-3111

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-1759**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**C. Timothy Gallagher**

Mailing Address 1100 N Arlington Heights Rd  
Ste 400

City Itasca State IL Zip Code 60143-3111

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1749**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **125.01**

**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 Page	FOR LINE NUMBER:	PAGE 73 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. David I. Gans**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer Inc VPresident Brand/Prod Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-781**

Amount of Each Receipt this Period  
41.67

**B. David I. Gans**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer Inc VPresident Brand/Prod Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-774**

Amount of Each Receipt this Period  
41.67

**C. Michael Garofalo**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City State Zip Code  
Atlanta GA 30338-7503

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

Name of Employer Occupation  
Pfizer Inc Sales/AM-2 SIs Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2290**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.01

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Michael Garofalo**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-2278**

Amount of Each Receipt this Period  
**41.67**

**B. Mark Gelbert**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 Giralda Farms

City Madison State NJ Zip Code 07940-1027

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

Name of Employer Pfizer, Inc. Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-3423**

Amount of Each Receipt this Period  
**104.17**

**c. Mark Gelbert**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 Giralda Farms

City Madison State NJ Zip Code 07940-1027

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

Name of Employer Pfizer, Inc. Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-3409**

Amount of Each Receipt this Period  
**104.17**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **250.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Frank J. Geoly</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1766</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 41.67
City Groton	State CT Zip Code 06340-5146	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 333.36
Name of Employer Pfizer Inc	Occupation Res Fellow Pathology - DVM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Frank J. Geoly</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1756</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 41.67
City Groton	State CT Zip Code 06340-5146	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 333.36
Name of Employer Pfizer Inc	Occupation Res Fellow Pathology - DVM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jerianne S. Gerloff</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1645</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY Zip Code 10017-5703	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 833.36
Name of Employer Pfizer Inc	Occupation Director Worldwide Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (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 76 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Jerianne S. Gerloff**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Director Worldwide Policy  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-1635**  
 Amount of Each Receipt this Period  
**104.17**

**B. Geno J. Germano**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer, Inc Occupation Executive Leadership  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 08 / 2015  
**Transaction ID : 85533C93FE3646A6A55C**  
 Amount of Each Receipt this Period  
**5000.00**

**C. Theresa H. Gibson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6465 Greenwood Plaza Blvd  
 Ste 150  
 City Greenwood Village State CO Zip Code 80111-4935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Sales/AM-3 SIs Rep-Spec Ph  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-1147**  
 Amount of Each Receipt this Period  
**41.67**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5145.84</b>
<b>TOTAL</b> This Period (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 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Theresa H. Gibson**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1139**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**B. Craig A. Gill**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1652**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**c. Craig A. Gill**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1642**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.01

**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 Page	FOR LINE NUMBER:	PAGE 78 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Douglas E. Giordano</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2015041610395-990</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="41.68"/>
Name of Employer	Occupation	
Pfizer Inc	Executive Leadership	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="333.44"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Douglas E. Giordano</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.		<b>Transaction ID : 20150504105459-982</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="41.68"/>
Name of Employer	Occupation	
Pfizer Inc	Executive Leadership	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="333.44"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. John B. Giusti Jr.</b>		Date of Receipt
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
Atlanta	GA	30338-7503
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2015041610395-765</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="41.67"/>
Name of Employer	Occupation	
Pfizer Inc	Sr Manager Dist Mgmt-Pharm	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="333.36"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="125.03"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 79 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. John B. Giusti Jr.</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-758</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State GA	
Zip Code 30338-7503		Aggregate Year-to-Date ▼ 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Sr Manager Dist Mgmt-Pharm	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Michael Gladstone</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-3129</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 833.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer, Inc.	Occupation Executive Leadership	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Michael Gladstone</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-3115</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 833.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer, Inc.	Occupation Executive Leadership	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.01
<b>TOTAL</b> This Period (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 80 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. James W. Glonek**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer Inc Director Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2633**

Amount of Each Receipt this Period  
41.67

**B. James W. Glonek**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer Inc Director Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2615**

Amount of Each Receipt this Period  
41.67

**C. Michael Goettler**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer, Inc. Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-3428**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 187.51

**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 Page	FOR LINE NUMBER:	PAGE 81 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Michael Goettler</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City New York State NY Zip Code 10017-5703		<b>Transaction ID : 20150504105459-3414</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Pfizer, Inc. Occupation Executive Leadership		<input type="text" value="104.17"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <input type="text" value="833.36"/>		

Full Name (Last, First, Middle Initial) <b>B. Elizabeth Golden</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City New York State NY Zip Code 10017-5703		<b>Transaction ID : 2015041610395-2433</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Pfizer Inc Occupation VPresident LdrshpColComms		<input type="text" value="104.17"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <input type="text" value="833.36"/>		

Full Name (Last, First, Middle Initial) <b>C. Elizabeth Golden</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City New York State NY Zip Code 10017-5703		<b>Transaction ID : 20150504105459-2419</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Pfizer Inc Occupation VPresident LdrshpColComms		<input type="text" value="104.17"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ <input type="text" value="833.36"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="312.51"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 OF 254  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Samuel Gonzalez**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc Director ChiefOfStaff/Supp

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2082**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**B. Samuel Gonzalez**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc Director ChiefOfStaff/Supp

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2071**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**C. Robert Goodson II**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City State Zip Code  
Centennial CO 80111-4935

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

Name of Employer Occupation  
Pfizer U.S. Pharmaceuticals Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1731**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 308.34

**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 83 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Robert Goodson II</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1721</b>
Mailing Address 6465 Greenwood Plaza Blvd Ste 150		Amount of Each Receipt this Period 100.00
City Centennial	State CO	
	Zip Code 80111-4935	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pfizer U.S. Pharmaceuticals	Occupation Sr Manager Dist Mgmt-Pharm	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Laura Allison Grannis</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2557</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State GA	
	Zip Code 30338-7503	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pfizer Inc	Occupation Sales/AM-3 Sls Rep-Pcare Ph	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name (Last, First, Middle Initial) <b>C. Laura Allison Grannis</b>		Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-2542</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State GA	
	Zip Code 30338-7503	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pfizer Inc	Occupation Sales/AM-3 Sls Rep-Pcare Ph	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	183.34
<b>TOTAL</b> This Period (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 84 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Peggy R. Gray**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1504**

Amount of Each Receipt this Period  
26.00

**B. Markus Green**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Litigation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2441**

Amount of Each Receipt this Period  
41.67

**c. Markus Green**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Litigation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2426**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 109.34

**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 85 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Linda L. Greeson**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Sales/AM-5 Ar/RegAcMgtPhar

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1613**

Amount of Each Receipt this Period  
41.67

**B. Linda L. Greeson**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Sales/AM-5 Ar/RegAcMgtPhar

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1602**

Amount of Each Receipt this Period  
41.67

**C. Thomas Griesmer**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1129**

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 113.34

**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 86 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Thomas Griesmer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6465 Greenwood Plaza Blvd  
 Ste 150  
 City Greenwood Village State CO Zip Code 80111-4935  
 Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-1121**  
 Amount of Each Receipt this Period  
 30.00

**B. Kevin P. Groome**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 N Arlington Heights Rd  
 Ste 400  
 City Itasca State IL Zip Code 60143-3111  
 Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-1139**  
 Amount of Each Receipt this Period  
 41.67

**C. Kevin P. Groome**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 N Arlington Heights Rd  
 Ste 400  
 City Itasca State IL Zip Code 60143-3111  
 Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-1131**  
 Amount of Each Receipt this Period  
 41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 113.34  
**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 87 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Robert D. Gunnels**  
Full Name (Last, First, Middle Initial)

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation Director LabAnimalSvs-DVM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-1502**

Amount of Each Receipt this Period  
**41.67**

**B. Robert D. Gunnels**  
Full Name (Last, First, Middle Initial)

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation Director LabAnimalSvs-DVM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1493**

Amount of Each Receipt this Period  
**41.67**

**C. Dawn Halkuff**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Comm Bus Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-1733**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... **125.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Dawn Halkuff**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Comm Bus Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1723**

Amount of Each Receipt this Period  
**41.67**

**B. Todd Henry Halpern**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 Giralda Farms

City Madison State NJ Zip Code 07940-1027

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

Name of Employer Pfizer, Inc. Occupation SrDirector Platform Support

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-3587**

Amount of Each Receipt this Period  
**41.67**

**C. Todd Henry Halpern**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 Giralda Farms

City Madison State NJ Zip Code 07940-1027

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

Name of Employer Pfizer, Inc. Occupation SrDirector Platform Support

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-3571**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **125.01**

**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 Page	FOR LINE NUMBER:	PAGE 89 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Jeffrey M. Hamilton</b>		Date of Receipt
Mailing Address 500 Arcola Rd		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
Collegeville	PA	19426-3982
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>2015041610395-3126</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pfizer, Inc.	Executive Leadership	<input type="text" value="41.67"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) <b>B. Jeffrey M. Hamilton</b>		Date of Receipt
Mailing Address 500 Arcola Rd		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
Collegeville	PA	19426-3982
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>20150504105459-3112</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pfizer, Inc.	Executive Leadership	<input type="text" value="41.67"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) <b>C. Ed Harnaga</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : <b>2015041610395-2612</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pfizer Inc	VPresident BU Communication	<input type="text" value="104.17"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="833.36"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="187.51"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 90 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Ed Harnaga**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident BU Communication

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-2594**

Amount of Each Receipt this Period  
**104.17**

**B. Timothy R. Harrison**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **218.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1250**

Amount of Each Receipt this Period  
**28.00**

**C. Jeff B. Harshfield**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Director Reg Mgmt Pharma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-511**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **182.17**

**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 91 OF 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Jeff B. Harshfield</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-508</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 50.00
City Atlanta	State GA	
Zip Code 30338-7503		Aggregate Year-to-Date ▼ 400.00
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director Reg Mgmt Pharma	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Brian Harvey</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2941</b>
Mailing Address Pfizer Inc Corporate Affairs/Govt Relatns		Amount of Each Receipt this Period 208.33
City Washington	State DC	
Zip Code 20004		Aggregate Year-to-Date ▼ 1666.64
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Executive Leadership	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Brian Harvey</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-2925</b>
Mailing Address Pfizer Inc Corporate Affairs/Govt Relatns		Amount of Each Receipt this Period 208.33
City Washington	State DC	
Zip Code 20004		Aggregate Year-to-Date ▼ 1666.64
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Executive Leadership	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	466.66
<b>TOTAL</b> This Period (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 92 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Robert H. Hazen**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-806**

Amount of Each Receipt this Period  
**41.67**

**B. Robert H. Hazen**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-799**

Amount of Each Receipt this Period  
**41.67**

**C. Caroline Mary Henesey**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer, Inc. Occupation SrDirector ApprovLiaison

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-3194**

Amount of Each Receipt this Period  
**104.17**

**SUBTOTAL** of Receipts This Page (optional)..... **187.51**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Caroline Mary Henesey**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer, Inc. SrDirector ApprovLiaison

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-3180**

Amount of Each Receipt this Period  
104.17

**B. Charles H. Hill III**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc Executive Top HR Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1012**

Amount of Each Receipt this Period  
104.17

**c. Charles H. Hill III**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc Executive Top HR Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1004**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 312.51

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Christopher J. Hill**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Client Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1786**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**B. Christopher J. Hill**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Client Partner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1776**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**C. Nina M. Hill**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-946**

Amount of Each Receipt this Period  
208.33

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 416.67

**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 95 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Nina M. Hill**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-939**

Amount of Each Receipt this Period  
208.33

**B. Michael C. Hoffman**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 Route 206 North

City Peapack State NJ Zip Code 07977

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

Name of Employer Pfizer Inc Occupation Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1269**

Amount of Each Receipt this Period  
104.17

**C. Michael C. Hoffman**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 Route 206 North

City Peapack State NJ Zip Code 07977

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

Name of Employer Pfizer Inc Occupation Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1262**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 416.67

**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 96 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Jean H. Holmes**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1437**

Amount of Each Receipt this Period  
41.67

**B. Jean H. Holmes**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1428**

Amount of Each Receipt this Period  
41.67

**C. Eric D. Hudson**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1501**

Amount of Each Receipt this Period  
42.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 125.34

**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 97 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Eric D. Hudson**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **312.00**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-1492**

Amount of Each Receipt this Period  
**42.00**

**B. Susan I. Hurst**  
Full Name (Last, First, Middle Initial)

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation A.R.Fellow PK-ClinPhrm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-631**

Amount of Each Receipt this Period  
**41.67**

**C. Susan I. Hurst**  
Full Name (Last, First, Middle Initial)

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation A.R.Fellow PK-ClinPhrm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-625**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **125.34**

**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 98 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Angela Hwang</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-908</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 41.67
City New York	State NY	
Zip Code 10017-5703		Amount of Each Receipt this Period 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Executive Leadership	Amount of Each Receipt this Period 333.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>B. Angela Hwang</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-901</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 41.67
City New York	State NY	
Zip Code 10017-5703		Amount of Each Receipt this Period 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Executive Leadership	Amount of Each Receipt this Period 333.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C. Julie Idelkope</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2610</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 208.33
City New York	State NY	
Zip Code 10017-5703		Amount of Each Receipt this Period 1666.64
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation SrDirector Worldwide Policy	Amount of Each Receipt this Period 1666.64
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	291.67
<b>TOTAL</b> This Period (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 99 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Julie Idelkope**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2592**

Amount of Each Receipt this Period  
208.33

**B. Alison L. Jackson**  
Full Name (Last, First, Middle Initial)

Mailing Address 4300 Oak Park Rd

City Sanford State NC Zip Code 27330-9550

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

Name of Employer Pfizer, Inc. Occupation SrAssociat Proc Prod Eng

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-3366**

Amount of Each Receipt this Period  
41.67

**C. Alison L. Jackson**  
Full Name (Last, First, Middle Initial)

Mailing Address 4300 Oak Park Rd

City Sanford State NC Zip Code 27330-9550

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

Name of Employer Pfizer, Inc. Occupation SrAssociat Proc Prod Eng

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-3352**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 291.67

**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 100 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. David J. Jacobs**

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation Sr Manager Ops Support

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-583**

Amount of Each Receipt this Period  
**30.00**

Full Name (Last, First, Middle Initial)  
**B. David J. Jacobs**

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation Sr Manager Ops Support

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-579**

Amount of Each Receipt this Period  
**30.00**

Full Name (Last, First, Middle Initial)  
**C. Michael James**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer, Inc Occupation Sales/AM-3 SIs Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-2795**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional)..... **110.00**

**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 101 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Shreya Devendra Jani</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2015041610395-1999</b>
Name of Employer Pfizer Inc		Amount of Each Receipt this Period
Occupation VPresident Public Affairs		<input type="text" value="104.17"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="833.36"/>	

Full Name (Last, First, Middle Initial) <b>B. Shreya Devendra Jani</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20150504105459-1988</b>
Name of Employer Pfizer Inc		Amount of Each Receipt this Period
Occupation VPresident Public Affairs		<input type="text" value="104.17"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="833.36"/>	

Full Name (Last, First, Middle Initial) <b>C. Steven Carl Janson</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2015041610395-1987</b>
Name of Employer Pfizer Inc		Amount of Each Receipt this Period
Occupation SrDirector Worldwide Policy		<input type="text" value="104.17"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="833.36"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="312.51"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Steven Carl Janson</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City New York State NY Zip Code 10017-5703		<b>Transaction ID : 20150504105459-1976</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Pfizer Inc Occupation SrDirector Worldwide Policy		<input type="text" value="104.17"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="833.36"/>	

Full Name (Last, First, Middle Initial) <b>B. Vera Janushkowsky</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City New York State NY Zip Code 10017-5703		<b>Transaction ID : 2015041610395-1623</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Pfizer Inc Occupation SrDirector Worldwide Policy		<input type="text" value="104.17"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="833.36"/>	

Full Name (Last, First, Middle Initial) <b>C. Vera Janushkowsky</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City New York State NY Zip Code 10017-5703		<b>Transaction ID : 20150504105459-1613</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Pfizer Inc Occupation SrDirector Worldwide Policy		<input type="text" value="104.17"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="833.36"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="312.51"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 103 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Amy S. Jenner**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pharmacia & Upjohn Company Occupation VPresident Area Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-288**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**B. Amy S. Jenner**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pharmacia & Upjohn Company Occupation VPresident Area Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-285**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. Antoinette D. Jernigan**

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1642**

Amount of Each Receipt this Period  
125.00

**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 Page	FOR LINE NUMBER:	PAGE 104 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Antoinette D. Jernigan**

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1632**

Amount of Each Receipt this Period  
125.00

Full Name (Last, First, Middle Initial)  
**B. Anne L. Johnson**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-634**

Amount of Each Receipt this Period  
50.00

Full Name (Last, First, Middle Initial)  
**C. Anne L. Johnson**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-628**

Amount of Each Receipt this Period  
50.00

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Brittany Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2462**

Amount of Each Receipt this Period  
30.00

**B. Brittany Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2446**

Amount of Each Receipt this Period  
30.00

**C. Edward Johnson**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Occupation Sales/AM-2 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2245**

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 160.00

**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 106 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Edward Johnson</b>		Date of Receipt
Mailing Address 6465 Greenwood Plaza Blvd Ste 150		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City Greenwood Village	State CO	Zip Code 80111-4935
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150504105459-2234</b>
Name of Employer	Occupation Sales/AM-2 Sls Rep-Pcare Ph	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Jasmine Johnson</b>		Date of Receipt
Mailing Address 1100 N Arlington Heights Rd Ste 400		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City Itasca	State IL	Zip Code 60143-3111
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150504105459-2486</b>
Name of Employer Pfizer Inc	Occupation Sr Manager Worldwide Policy	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="25.00"/>
	<input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Rady A. Johnson</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2015041610395-1128</b>
Name of Employer Pfizer Inc	Occupation Executive Leadership	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="104.17"/>
	<input type="text" value="833.36"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="229.17"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 107 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Rady A. Johnson**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1120**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**B. Shawnta D. Johnson**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pharmacia & Upjohn Company Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-187**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**C. Shawnta D. Johnson**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pharmacia & Upjohn Company Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-186**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional).....▶ 187.51

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 254
	<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)  
**PFIZER INC. PAC**

**A. Kevin D. Jones**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pfizer Inc Occupation SrDirector Reg Mgmt Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-1660**  
 Amount of Each Receipt this Period  
 104.17

**B. Kevin D. Jones**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pfizer Inc Occupation SrDirector Reg Mgmt Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-1650**  
 Amount of Each Receipt this Period  
 104.17

**C. Robert Walker Jones**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation VPresident Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-1886**  
 Amount of Each Receipt this Period  
 208.33

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 416.67  
**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:	PAGE 109 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Robert Walker Jones**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc VPresident Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1876**

Amount of Each Receipt this Period  
208.33

Full Name (Last, First, Middle Initial)  
**B. Guy E. Jordan**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pharmacia & Upjohn Company Director Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-358**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**C. Guy E. Jordan**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pharmacia & Upjohn Company Director Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-355**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 416.67

**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 110 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Ellen T. Kaplan Goldstein</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-332</b>
Mailing Address 1100 N Arlington Heights Rd Ste 400		Amount of Each Receipt this Period 45.00
City Itasca State IL Zip Code 60143-3111	FEC ID number of contributing federal political committee. C	
Name of Employer Pharmacia & Upjohn Company	Occupation Sales/AM-3 Sls Rep-Pcare Ph	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>B. Ellen T. Kaplan Goldstein</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-329</b>
Mailing Address 1100 N Arlington Heights Rd Ste 400		Amount of Each Receipt this Period 45.00
City Itasca State IL Zip Code 60143-3111	FEC ID number of contributing federal political committee. C	
Name of Employer Pharmacia & Upjohn Company	Occupation Sales/AM-3 Sls Rep-Pcare Ph	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>C. Navin Katyal</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2431</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 500.00
City New York State NY Zip Code 10017-5703	FEC ID number of contributing federal political committee. C	
Name of Employer Pfizer Inc	Occupation VPresident ChiefOfStaff/Supp	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 518.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	590.00
<b>TOTAL</b> This Period (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 111 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Donna Kaylor</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1872</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 833.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director Worldwide Policy	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Donna Kaylor</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1862</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 833.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director Worldwide Policy	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Stephen E. Kearney Jr.</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1146</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State GA	
Zip Code 30338-7503		Aggregate Year-to-Date ▼ 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director FldMedMedLiasNMD	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.01
<b>TOTAL</b> This Period (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 113 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. John Francis Kelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
880.00

Date of Receipt  
04 / 15 / 2015  
Transaction ID : 2015041610395-829

Amount of Each Receipt this Period  
110.00

**B. John R. Kelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
04 / 15 / 2015  
Transaction ID : 2015041610395-1403

Amount of Each Receipt this Period  
50.00

**C. John Francis Kelly**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
880.00

Date of Receipt  
04 / 30 / 2015  
Transaction ID : 20150504105459-822

Amount of Each Receipt this Period  
110.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 270.00

**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 114 OF 254		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. John R. Kelly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-1395**  
 Amount of Each Receipt this Period 50.00

**B. William C. Kennally III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Route 206 North  
 City Peapack State NJ Zip Code 07977  
 Name of Employer Pharmacia & Upjohn Company Occupation Executive Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-140**  
 Amount of Each Receipt this Period 104.17

**C. William C. Kennally III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Route 206 North  
 City Peapack State NJ Zip Code 07977  
 Name of Employer Pharmacia & Upjohn Company Occupation Executive Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-139**  
 Amount of Each Receipt this Period 104.17

**SUBTOTAL** of Receipts This Page (optional).....▶ 258.34  
**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:	PAGE 115 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Timothy E. Kern</b>		Date of Receipt
Mailing Address 977 Anderson Hill Rd		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City State Zip Code Rye Brook NY 10573-5412		<b>Transaction ID : 2015041610395-1088</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="41.67"/>	
Name of Employer Pfizer Inc	Occupation SrDirector STrngCuri/ConD-P	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) <b>B. Timothy E. Kern</b>		Date of Receipt
Mailing Address 977 Anderson Hill Rd		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City State Zip Code Rye Brook NY 10573-5412		<b>Transaction ID : 20150504105459-1080</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="41.67"/>	
Name of Employer Pfizer Inc	Occupation SrDirector STrngCuri/ConD-P	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) <b>C. James Kilts</b>		Date of Receipt
Mailing Address 235 E 42nd St		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City State Zip Code New York NY 10017-5703		<b>Transaction ID : B540BFDD6A264232AA07</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="1250.00"/>	
Name of Employer Pfizer, Inc.	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1333.34"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 116 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Kyle Kirby</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1167</b>
Mailing Address 6465 Greenwood Plaza Blvd Ste 150		Amount of Each Receipt this Period 41.67
City Greenwood Village	State Zip Code CO 80111-4935	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 333.36
Name of Employer Pfizer Inc	Occupation Sales/AM-3 Sls Rep-Pcare Ph	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>B. Kyle Kirby</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1159</b>
Mailing Address 6465 Greenwood Plaza Blvd Ste 150		Amount of Each Receipt this Period 41.67
City Greenwood Village	State Zip Code CO 80111-4935	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 333.36
Name of Employer Pfizer Inc	Occupation Sales/AM-3 Sls Rep-Pcare Ph	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C. Gabriel L. Kleiman</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1706</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State Zip Code NY 10017-5703	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 833.36
Name of Employer Pfizer Inc	Occupation SrDirector Patents	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (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 117 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Gabriel L. Kleiman**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Patents

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1696**

Amount of Each Receipt this Period  
**104.17**

**B. David A. Knouft**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer, Inc. Occupation SrDirector Brand/Prod Mgmt

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  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-3209**

Amount of Each Receipt this Period  
**75.00**

**C. David A. Knouft**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer, Inc. Occupation SrDirector Brand/Prod Mgmt

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  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-3195**

Amount of Each Receipt this Period  
**75.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>254.17</b>
<b>TOTAL</b> This Period (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 118 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Frank E. Koehn**  
Full Name (Last, First, Middle Initial)

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer, Inc. Occupation Res Fellow Chemistry

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **04 / 15 / 2015**

**Transaction ID : 2015041610395-3376**

Amount of Each Receipt this Period **30.00**

**B. Frank E. Koehn**  
Full Name (Last, First, Middle Initial)

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer, Inc. Occupation Res Fellow Chemistry

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : 20150504105459-3362**

Amount of Each Receipt this Period **30.00**

**C. John D. Kohutka**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer, Inc. Occupation SrDirector Brand/Prod Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt **04 / 15 / 2015**

**Transaction ID : 2015041610395-3210**

Amount of Each Receipt this Period **41.67**

**SUBTOTAL** of Receipts This Page (optional)..... **101.67**

**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 119 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. John D. Kohutka**

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer, Inc. SrDirector Brand/Prod Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-3196**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**B. John William Kraemer**

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation  
SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
940.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : CF5AB352922B43C7BEBA**

Amount of Each Receipt this Period  
470.00

Full Name (Last, First, Middle Initial)  
**C. John William Kraemer**

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation  
SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
940.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-3090**

Amount of Each Receipt this Period  
117.50

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 629.17

**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 120 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. John William Kraemer**  
Full Name (Last, First, Middle Initial)

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Occupation  
Sr Director Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
940.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-3076**

Amount of Each Receipt this Period  
117.50

**B. Matthew R. Krebs**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Occupation  
Pfizer Inc Sr Manager Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1614**

Amount of Each Receipt this Period  
41.67

**C. Matthew R. Krebs**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Occupation  
Pfizer Inc Sr Manager Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1603**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.84

**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 121 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Alaina Kupec</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1344</b>
Mailing Address 6465 Greenwood Plaza Blvd Ste 150		Amount of Each Receipt this Period 321.84
City Greenwood Village	State CO	
Zip Code 80111-4935		Aggregate Year-to-Date ▼ 321.84
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Sr Manager Dist Mgmt-Pharm	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Alaina Kupec</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1336</b>
Mailing Address 6465 Greenwood Plaza Blvd Ste 150		Amount of Each Receipt this Period 20.84
City Greenwood Village	State CO	
Zip Code 80111-4935		Aggregate Year-to-Date ▼ 321.84
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Sr Manager Dist Mgmt-Pharm	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Ian Lakeman</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-66</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 41.67
City Groton	State CT	
Zip Code 06340-5146		Aggregate Year-to-Date ▼ 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pharmacia & Upjohn Company	Occupation VPresident Leadership	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	105.51
<b>TOTAL</b> This Period (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 122 OF 254
	<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)  
**PFIZER INC. PAC**

**A. Ian Lakeman**  
Full Name (Last, First, Middle Initial)

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pharmacia & Upjohn Company Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-65**

Amount of Each Receipt this Period  
**41.67**

**B. Douglas M. Lankler**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Top Legal Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-646**

Amount of Each Receipt this Period  
**104.17**

**C. Douglas M. Lankler**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Top Legal Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-640**

Amount of Each Receipt this Period  
**104.17**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **250.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Wendy M. Lazarus**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 Giralda Farms

City Madison State NJ Zip Code 07940-1027

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

Name of Employer Pfizer Inc Occupation Director Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-1003**

Amount of Each Receipt this Period  
**41.67**

**B. Wendy M. Lazarus**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 Giralda Farms

City Madison State NJ Zip Code 07940-1027

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

Name of Employer Pfizer Inc Occupation Director Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-995**

Amount of Each Receipt this Period  
**41.67**

**C. Darrick Lebeouf**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-2692**

Amount of Each Receipt this Period  
**104.17**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **187.51**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Darrick Lebeouf**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-2674**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**B. Chan Lee**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pharmacia & Upjohn Company Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**  
**Transaction ID : 2015041610395-40**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**C. Chan Lee**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pharmacia & Upjohn Company Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-40**

Amount of Each Receipt this Period  
**104.17**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>312.51</b>
<b>TOTAL</b> This Period (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 125 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Hsiao-Yu Lee</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1430</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 104.17
City Groton	State CT Zip Code 06340-5146	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 833.36
Name of Employer Pfizer Inc	Occupation Sr Manager Stats Program	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Hsiao-Yu Lee</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1421</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 104.17
City Groton	State CT Zip Code 06340-5146	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 833.36
Name of Employer Pfizer Inc	Occupation Sr Manager Stats Program	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. David M. Lehman</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-3205</b>
Mailing Address 610 Main St		Amount of Each Receipt this Period 26.00
City Cambridge	State MA Zip Code 02139-3526	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 208.00
Name of Employer Pfizer, Inc.	Occupation SrDirector Fin'l Plan&Anal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	234.34
<b>TOTAL</b> This Period (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 126 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Eric C. Lensmeyer**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pharmacia & Upjohn Company Occupation Director SlsComp&AwPln-Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.28**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-184**

Amount of Each Receipt this Period  
**41.66**

**B. Eric C. Lensmeyer**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pharmacia & Upjohn Company Occupation Director SlsComp&AwPln-Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.28**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-183**

Amount of Each Receipt this Period  
**41.66**

**C. Geoffrey M. Levitt**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer, Inc. Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-3664**

Amount of Each Receipt this Period  
**104.17**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>187.49</b>
<b>TOTAL</b> This Period (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 127 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Geoffrey M. Levitt</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-3648</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State Zip Code NY 10017-5703	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 833.36
Name of Employer Pfizer, Inc.	Occupation Executive Leadership	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Freda C. Lewis-Hall</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-84</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State Zip Code NY 10017-5703	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 833.36
Name of Employer Pharmacia & Upjohn Company	Occupation Executive CMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Freda C. Lewis-Hall</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-83</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State Zip Code NY 10017-5703	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 833.36
Name of Employer Pharmacia & Upjohn Company	Occupation Executive CMO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	312.51
<b>TOTAL</b> This Period (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 128 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Robert Libbey</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2332</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 30.00
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 240.00
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation SrDirector WWMedRelation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Robert Libbey</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-2320</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 30.00
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 240.00
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation SrDirector WWMedRelation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. William C. Longa</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1764</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 41.67
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation SrDirector Platform Support	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	101.67
<b>TOTAL</b> This Period (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 129 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. William C. Longa</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1754</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 41.67
City New York	State Zip Code NY 10017-5703	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 333.36
Name of Employer Pfizer Inc	Occupation SrDirector Platform Support	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>B. Adrian G. Looney</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-880</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 208.33
City New York	State Zip Code NY 10017-5703	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1666.64
Name of Employer Pfizer Inc	Occupation SrDirector Patents	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C. Adrian G. Looney</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-874</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 208.33
City New York	State Zip Code NY 10017-5703	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1666.64
Name of Employer Pfizer Inc	Occupation SrDirector Patents	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	458.33
<b>TOTAL</b> This Period (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 130 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Kirsten Lund-Jurgensen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 Giralda Farms  
 City Madison State NJ Zip Code 07940-1027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Executive Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-644**  
 Amount of Each Receipt this Period  
 208.33

**B. Kirsten Lund-Jurgensen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 Giralda Farms  
 City Madison State NJ Zip Code 07940-1027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Executive Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-638**  
 Amount of Each Receipt this Period  
 208.33

**C. Alexander R. MacKenzie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Groton Plant and Research Center Eastern Point Road  
 City Groton State CT Zip Code 06340-5146  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Executive Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-719**  
 Amount of Each Receipt this Period  
 104.17

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	520.83
<b>TOTAL</b> This Period (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 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Alexander R. MacKenzie</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-712</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 104.17
City Groton State CT Zip Code 06340-5146	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Pfizer Inc Occupation Executive Leadership	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36

Full Name (Last, First, Middle Initial) <b>B. Anthony J. Maddaluna</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1037</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York State NY Zip Code 10017-5703	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Pfizer Inc Occupation Executive TopGlbManu	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36

Full Name (Last, First, Middle Initial) <b>C. Anthony J. Maddaluna</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1029</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York State NY Zip Code 10017-5703	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Pfizer Inc Occupation Executive TopGlbManu	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	312.51
<b>TOTAL</b> This Period (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 132 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Margaret Madden**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1699**

Amount of Each Receipt this Period  
104.17

**B. Margaret Madden**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1689**

Amount of Each Receipt this Period  
104.17

**C. Kerrin Mahaffey**  
Full Name (Last, First, Middle Initial)

Mailing Address 401 N Middletown Rd

City Pearl River State NY Zip Code 10965-1298

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

Name of Employer Pfizer, Inc. Occupation SrDirector Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-3225**

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 258.34

**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 133 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Kerrin Mahaffey</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-3211</b>
Mailing Address 401 N Middletown Rd		Amount of Each Receipt this Period 50.00
City Pearl River	State NY	Zip Code 10965-1298
FEC ID number of contributing federal political committee.	C	
Name of Employer Pfizer, Inc.	Occupation SrDirector Leadership	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Alexander Manganiello</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-3675</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 33.00
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee.	C	
Name of Employer Pfizer, Inc.	Occupation VPresident Platform Support	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.00	

Full Name (Last, First, Middle Initial) <b>C. Alexander Manganiello</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-3659</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 33.00
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee.	C	
Name of Employer Pfizer, Inc.	Occupation VPresident Platform Support	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	116.00
<b>TOTAL</b> This Period (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 134 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Anna Maria Maritato**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc SrDirector Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-860**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**B. Anna Maria Maritato**

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc SrDirector Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-853**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**C. Dyson R. Massengill II**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City State Zip Code  
Greenwood Village CO 80111-4935

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

Name of Employer Occupation  
Pfizer Inc Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1226**

Amount of Each Receipt this Period  
26.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 234.34

**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 136 OF 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Michael P. McDermott**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer, Inc. Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-3215**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**B. Mary Ann D. McGerty**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**  
**Transaction ID : 2015041610395-1319**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**C. Mary Ann D. McGerty**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-1311**

Amount of Each Receipt this Period  
**41.67**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>187.51</b>
<b>TOTAL</b> This Period (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 137 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Peter S. McGuigan**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pharmacia & Upjohn Company Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-27**

Amount of Each Receipt this Period  
**104.17**

**B. Peter S. McGuigan**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pharmacia & Upjohn Company Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-27**

Amount of Each Receipt this Period  
**104.17**

**C. Janet McUlsky**  
Full Name (Last, First, Middle Initial)

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-1880**

Amount of Each Receipt this Period  
**104.17**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **312.51**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Janet McUlisky**

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-1870**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**B. Matthew B. Meehan**

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation Director Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **898.34**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**  
**Transaction ID : 2015041610395-1867**

Amount of Each Receipt this Period  
**115.00**

Full Name (Last, First, Middle Initial)  
**C. Matthew B. Meehan**

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation Director Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **898.34**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-1857**

Amount of Each Receipt this Period  
**115.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>334.17</b>
<b>TOTAL</b> This Period (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 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Cecilia M. Meitzner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-1567**  
 Amount of Each Receipt this Period  
 32.00

**B. Cecilia M. Meitzner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-1556**  
 Amount of Each Receipt this Period  
 32.00

**C. Xu Meng**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10777 Science Center Dr  
 # CB1  
 City San Diego State CA Zip Code 92121-1111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer, Inc. Occupation VPresident ClinPh/Pharmacometr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-3237**  
 Amount of Each Receipt this Period  
 41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 105.67  
**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: PAGE 140 OF 254  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Xu Meng**

Mailing Address 10777 Science Center Dr  
# CB1

City San Diego State CA Zip Code 92121-1111

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

Name of Employer Pfizer, Inc. Occupation VPresident ClinPh/Pharmacometr

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-3223**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**B. Heather Merrick**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Sr Manager SlsComp&AwPln-Ph

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**  
**Transaction ID : 2015041610395-2534**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**C. Heather Merrick**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Sr Manager SlsComp&AwPln-Ph

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-2519**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **125.01**

**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 Page	FOR LINE NUMBER:	PAGE 141 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)  
**PFIZER INC. PAC**

**A. Ryan D. Micallef**  
Full Name (Last, First, Middle Initial)

Mailing Address 1100 N Arlington Heights Rd  
Ste 400

City Itasca State IL Zip Code 60143-3111

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

Name of Employer Pfizer Inc Occupation Director Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-2248**

Amount of Each Receipt this Period  
**41.67**

**B. Ryan D. Micallef**  
Full Name (Last, First, Middle Initial)

Mailing Address 1100 N Arlington Heights Rd  
Ste 400

City Itasca State IL Zip Code 60143-3111

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

Name of Employer Pfizer Inc Occupation Director Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-2237**

Amount of Each Receipt this Period  
**41.67**

**C. Daniel J. Mikel**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 SIs Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-871**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **125.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Daniel J. Mikel**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-864**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**B. Sajal Mitra**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-839**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**C. Sajal Mitra**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-832**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **125.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Michael C. Moorman</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1207</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 50.00
City New York	State Zip Code NY 10017-5703	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 400.00
Name of Employer Pfizer Inc	Occupation SrDirector Logistics Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Michael C. Moorman</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1200</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 50.00
City New York	State Zip Code NY 10017-5703	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 400.00
Name of Employer Pfizer Inc	Occupation SrDirector Logistics Mgmt	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Thomas Morris III</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-3704</b>
Mailing Address 100 Route 206 North		Amount of Each Receipt this Period 35.00
City Peapack	State Zip Code NJ 07977	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 280.00
Name of Employer Pfizer, Inc.	Occupation Director Tax Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135.00
<b>TOTAL</b> This Period (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 144 OF 254  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Thomas Morris III**

Mailing Address 100 Route 206 North

City State Zip Code  
Peapack NJ 07977

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

Name of Employer Occupation  
Pfizer, Inc. Director Tax Planning

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-3688**

Amount of Each Receipt this Period  
35.00

Full Name (Last, First, Middle Initial)  
**B. Carlos Augusto Moscol**

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer, Inc. VPresident Brand/Prod Mgmt

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-3243**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**C. Carlos Augusto Moscol**

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer, Inc. VPresident Brand/Prod Mgmt

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-3229**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 243.34

**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 145 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. David M. Moss**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 Giralda Farms

City Madison State NJ Zip Code 07940-1027

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

Name of Employer Pfizer, Inc. Occupation VPresident BusUnitSupport

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt **04 / 15 / 2015**

**Transaction ID : 2015041610395-3706**

Amount of Each Receipt this Period **41.67**

**B. David M. Moss**  
Full Name (Last, First, Middle Initial)

Mailing Address 5 Giralda Farms

City Madison State NJ Zip Code 07940-1027

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

Name of Employer Pfizer, Inc. Occupation VPresident BusUnitSupport

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : 20150504105459-3690**

Amount of Each Receipt this Period **41.67**

**C. David A. Moules**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt **04 / 15 / 2015**

**Transaction ID : 2015041610395-2906**

Amount of Each Receipt this Period **104.17**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **187.51**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. David A. Moules**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2890**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**B. Matthew F. Mueller**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.72

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1512**

Amount of Each Receipt this Period  
30.84

Full Name (Last, First, Middle Initial)  
**C. Brian C. Murray**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 SIs Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-656**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 176.68

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 254
	<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)  
**PFIZER INC. PAC**

**A. Brian C. Murray**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6465 Greenwood Plaza Blvd  
 Ste 150  
 City Greenwood Village State CO Zip Code 80111-4935  
 Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-650**  
 Amount of Each Receipt this Period 41.67

**B. Bryan Murray**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation Sr Manager Worldwide Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-2495**  
 Amount of Each Receipt this Period 104.17

**C. Bryan Murray**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation Sr Manager Worldwide Policy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-2478**  
 Amount of Each Receipt this Period 104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.01  
**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 Page	FOR LINE NUMBER:	PAGE 148 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Jeffry P. Neidhardt</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2015041610395-981</b>
Name of Employer Pfizer Inc		Amount of Each Receipt this Period
Occupation VPresident Fin'l Plan&Anal		<input type="text" value="43.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="344.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Jeffry P. Neidhardt</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20150504105459-973</b>
Name of Employer Pfizer Inc		Amount of Each Receipt this Period
Occupation VPresident Fin'l Plan&Anal		<input type="text" value="43.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="344.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Christopher J. Nettleton</b>		Date of Receipt
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City Atlanta	State GA	Zip Code 30338-7503
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2015041610395-1587</b>
Name of Employer Pfizer Inc		Amount of Each Receipt this Period
Occupation Sales/AM-3 Sls Rep-Spec Ph		<input type="text" value="41.67"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="333.36"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="127.67"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 254
	<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)  
**PFIZER INC. PAC**

**A. Christopher J. Nettleton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Spec Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-1576**  
 Amount of Each Receipt this Period  
 41.67

**B. Mia T. Newell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation Director Proj Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-647**  
 Amount of Each Receipt this Period  
 41.67

**C. Mia T. Newell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation Director Proj Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-641**  
 Amount of Each Receipt this Period  
 41.67

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (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 150 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Diem Nguyen</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2576</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 49.00
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Executive Leadership	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 343.00	

Full Name (Last, First, Middle Initial) <b>B. Anneka Elizabeth Norgren</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2312</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation SrDirector Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name (Last, First, Middle Initial) <b>C. Anneka Elizabeth Norgren</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-2300</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation SrDirector Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	132.34
<b>TOTAL</b> This Period (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 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Tiffany M. Nowell**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Platform Support

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-2783**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**B. Michael K. O'Brien**

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer, Inc. Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**  
**Transaction ID : 2015041610395-3389**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**C. Michael K. O'Brien**

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer, Inc. Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-3375**

Amount of Each Receipt this Period  
**104.17**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>250.01</b>
<b>TOTAL</b> This Period (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 153 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Vicki Jay O'Grady-Longo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6465 Greenwood Plaza Blvd  
 Ste 150  
 City Greenwood Village State CO Zip Code 80111-4935  
 Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-2977**  
 Amount of Each Receipt this Period 41.67

**B. Vicki Jay O'Grady-Longo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6465 Greenwood Plaza Blvd  
 Ste 150  
 City Greenwood Village State CO Zip Code 80111-4935  
 Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-2961**  
 Amount of Each Receipt this Period 41.67

**C. Mary D. Oates**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 Route 206 North  
 City Peapack State NJ Zip Code 07977  
 Name of Employer Pfizer Inc Occupation Executive Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-542**  
 Amount of Each Receipt this Period 41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.01  
**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 Page

FOR LINE NUMBER: PAGE 154 OF 254  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Mary D. Oates**

Mailing Address 100 Route 206 North

City State Zip Code  
Peapack NJ 07977

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

Name of Employer Occupation  
Pfizer Inc Executive Leadership

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-538**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**B. Michael R. Olinger**

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer, Inc. Director Prog/ProjMgmt

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-3242**

Amount of Each Receipt this Period  
27.00

Full Name (Last, First, Middle Initial)  
**C. Dominick P. Oliverio**

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer Inc Director Brand/Prod Mgmt

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-1757**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 110.34

**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 155 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Dominick P. Oliverio**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer Inc Director Brand/Prod Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1747**

Amount of Each Receipt this Period  
41.67

**B. Laurie J. Olson**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc Executive TopStrat&BusDevLd

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-953**

Amount of Each Receipt this Period  
104.17

**C. Laurie J. Olson**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City State Zip Code  
New York NY 10017-5703

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

Name of Employer Occupation  
Pfizer Inc Executive TopStrat&BusDevLd

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-945**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.01

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. James Kevin Orr</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2015041610395-1263</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pfizer Inc	Director Worldwide Policy	<input type="text" value="104.17"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="456.68"/>	

Full Name (Last, First, Middle Initial) <b>B. James Kevin Orr</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150504105459-1256</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pfizer Inc	Director Worldwide Policy	<input type="text" value="104.17"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="456.68"/>	

Full Name (Last, First, Middle Initial) <b>C. Theresa Marie Oxley</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2015041610395-3259</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pfizer, Inc.	VPresident Talent&OrgCap	<input type="text" value="40.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="320.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="248.34"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 157 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Theresa Marie Oxley**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer, Inc. Occupation VPresident Talent&OrgCap

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-3245**

Amount of Each Receipt this Period  
**40.00**

Full Name (Last, First, Middle Initial)  
**B. Denny F. Palacios**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-1826**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**C. Denny F. Palacios**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1816**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... **123.34**

**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 158 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Donald C. Palazini**  
Full Name (Last, First, Middle Initial)

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation SrDirector Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **368.00**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-1894**

Amount of Each Receipt this Period  
**46.00**

**B. Donald C. Palazini**  
Full Name (Last, First, Middle Initial)

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation SrDirector Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **368.00**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-1884**

Amount of Each Receipt this Period  
**46.00**

**C. Nikhil J. Parekh Ph.D.**  
Full Name (Last, First, Middle Initial)

Mailing Address 1211 Sherwood Ave

City Richmond State VA Zip Code 23220-1212

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

Name of Employer Pfizer, Inc. Occupation SrDirector R&D Ther/Prod Dev

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-3723**

Amount of Each Receipt this Period  
**35.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **127.00**

**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 159 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Nikhil J. Parekh Ph.D.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1211 Sherwood Ave  
 City Richmond State VA Zip Code 23220-1212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer, Inc. Occupation SrDirector R&D Ther/Prod Dev  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-3707**  
 Amount of Each Receipt this Period  
 35.00

**B. Amber Lee Pearce**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Director BU Communication  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-2783**  
 Amount of Each Receipt this Period  
 104.17

**C. Amber Lee Pearce**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Director BU Communication  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-2766**  
 Amount of Each Receipt this Period  
 104.17

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	243.34
<b>TOTAL</b> This Period (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 160 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Shaye L. Pentino**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2175**

Amount of Each Receipt this Period  
30.00

**B. Shaye L. Pentino**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2164**

Amount of Each Receipt this Period  
30.00

**C. Carolina Perez**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Tax Planning

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-3011**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional).....▶ 101.67

**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 161 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Carolina Perez**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Tax Planning

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-2994**

Amount of Each Receipt this Period  
**41.67**

**B. Warren E. Perez**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pharmacia & Upjohn Company Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.02**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-302**

Amount of Each Receipt this Period  
**41.67**

**C. Warren E. Perez**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pharmacia & Upjohn Company Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.02**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-299**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **125.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Ronald M. Perry**

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer, Inc. VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-3263**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**B. Ronald M. Perry**

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer, Inc. VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-3249**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**C. Christopher Peterson**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City State Zip Code  
Atlanta GA 30338-7503

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

Name of Employer Occupation  
Pfizer Inc Director Reg Mgmt Pharma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-677**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.01

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Christopher Peterson**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Director Reg Mgmt Pharma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-671**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**B. Kadidia C. Petridis**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1962**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**C. Kadidia C. Petridis**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1951**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.01

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 254
	<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)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Arnelde H. Pitre</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-795</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 41.67
City Groton State CT Zip Code 06340-5146	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Pfizer Inc	Occupation Director ClinicalResOps	Aggregate Year-to-Date ▼ 333.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Arnelde H. Pitre</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-788</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 41.67
City Groton State CT Zip Code 06340-5146	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Pfizer Inc	Occupation Director ClinicalResOps	Aggregate Year-to-Date ▼ 333.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Elena Kholodenko Polansky</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1838</b>
Mailing Address 100 Route 206 North		Amount of Each Receipt this Period 41.67
City Peapack State NJ Zip Code 07977	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Pfizer Inc	Occupation SrDirector Procur/BuySuppt	Aggregate Year-to-Date ▼ 333.36
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (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 165 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Elena Kholodenko Polansky**

Mailing Address 100 Route 206 North

City Peapack State NJ Zip Code 07977

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

Name of Employer Pfizer Inc Occupation SrDirector Procur/BuySuppt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1829**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**B. Robert J. Polzer**

Mailing Address 1 Burt Rd

City Andover State MA Zip Code 01810-5901

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-1103**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**C. Robert J. Polzer**

Mailing Address 1 Burt Rd

City Andover State MA Zip Code 01810-5901

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1095**

Amount of Each Receipt this Period  
**41.67**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>125.01</b>
<b>TOTAL</b> This Period (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 166 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Gwendolyn Kay Ponder</b>		Date of Receipt
Mailing Address 500 Arcola Rd		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
Collegeville	PA	19426-3982
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2015041610395-3740</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pfizer, Inc.	SrDirector Platform Support	<input type="text" value="41.67"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) <b>B. Gwendolyn Kay Ponder</b>		Date of Receipt
Mailing Address 500 Arcola Rd		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
Collegeville	PA	19426-3982
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150504105459-3724</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pfizer, Inc.	SrDirector Platform Support	<input type="text" value="41.67"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) <b>C. Claudia Bridgeford Poteet</b>		Date of Receipt
Mailing Address Pfizer Inc Corporate Affairs/Govt Relatns		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
Washington	DC	20004
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2015041610395-2823</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pfizer Inc	Director Govt Relations	<input type="text" value="104.17"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="833.36"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="187.51"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 167 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Claudia Bridgeford Poteet</b>		Date of Receipt
Mailing Address Pfizer Inc Corporate Affairs/Govt Relatns		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
Washington	DC	20004
FEC ID number of contributing federal political committee.		<b>Transaction ID : 20150504105459-2806</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="104.17"/>
Name of Employer	Occupation	
Pfizer Inc	Director Govt Relations	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="833.36"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Sherry Pudloski</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.		<b>Transaction ID : 2015041610395-2428</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="104.17"/>
Name of Employer	Occupation	
Pfizer Inc	VPresident LdrshpColComms	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="833.36"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Sherry Pudloski</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
New York	NY	10017-5703
FEC ID number of contributing federal political committee.		<b>Transaction ID : 20150504105459-2415</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="104.17"/>
Name of Employer	Occupation	
Pfizer Inc	VPresident LdrshpColComms	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="833.36"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="312.51"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 168 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Louis Ramos**  
Full Name (Last, First, Middle Initial)

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation SrDirector Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-2686**

Amount of Each Receipt this Period  
**104.17**

**B. Louis Ramos**  
Full Name (Last, First, Middle Initial)

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation SrDirector Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-2668**

Amount of Each Receipt this Period  
**104.17**

**c. Ian C. Read**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1666.72**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-814**

Amount of Each Receipt this Period  
**208.34**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **416.68**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Ian C. Read**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.72

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-807**

Amount of Each Receipt this Period  
208.34

Full Name (Last, First, Middle Initial)  
**B. Paul A. Rejto**

Mailing Address 10777 Science Center Dr  
# CB1

City San Diego State CA Zip Code 92121-1111

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

Name of Employer Pfizer Inc Occupation SrDirector Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-449**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**C. Paul A. Rejto**

Mailing Address 10777 Science Center Dr  
# CB1

City San Diego State CA Zip Code 92121-1111

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

Name of Employer Pfizer Inc Occupation SrDirector Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-447**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 291.68

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. David L. Remmert**  
Full Name (Last, First, Middle Initial)

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation Manager SolutionDelivery

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt **04 / 15 / 2015**

**Transaction ID : 2015041610395-2408**

Amount of Each Receipt this Period **41.67**

**B. David L. Remmert**  
Full Name (Last, First, Middle Initial)

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation Manager SolutionDelivery

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : 20150504105459-2395**

Amount of Each Receipt this Period **41.67**

**C. Albert Walter Ribeiro**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Public Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt **04 / 15 / 2015**

**Transaction ID : 2015041610395-2689**

Amount of Each Receipt this Period **104.17**

**SUBTOTAL** of Receipts This Page (optional)..... **187.51**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Albert Walter Ribeiro**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-2671**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**B. Angela W. Riemer**

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer, Inc. Occupation SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-3761**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**C. Angela W. Riemer**

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer, Inc. Occupation SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-3745**

Amount of Each Receipt this Period  
**104.17**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **312.51**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 172 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Lawrence A. Riley Jr.</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1115</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State Zip Code GA 30338-7503	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 333.36
Name of Employer Pfizer Inc	Occupation Sr Manager Bus Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Lawrence A. Riley Jr.</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1107</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State Zip Code GA 30338-7503	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 333.36
Name of Employer Pfizer Inc	Occupation Sr Manager Bus Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Caroline Roan</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1788</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State Zip Code NY 10017-5703	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 833.36
Name of Employer Pfizer Inc	Occupation Executive Leadership	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (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 173 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Caroline Roan</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City New York State NY Zip Code 10017-5703		<b>Transaction ID : 20150504105459-1778</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Pfizer Inc Occupation Executive Leadership		<input type="text" value="104.17"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="833.36"/>

Full Name (Last, First, Middle Initial) <b>B. William G. Roche</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City New York State NY Zip Code 10017-5703		<b>Transaction ID : 2015041610395-1108</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Pfizer Inc Occupation Executive Leadership		<input type="text" value="104.17"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="833.36"/>

Full Name (Last, First, Middle Initial) <b>C. William G. Roche</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City New York State NY Zip Code 10017-5703		<b>Transaction ID : 20150504105459-1100</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Pfizer Inc Occupation Executive Leadership		<input type="text" value="104.17"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="833.36"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="312.51"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 254
	<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)  
**PFIZER INC. PAC**

**A. David Louis Rodin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation SrDirector Proj Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-2922**  
 Amount of Each Receipt this Period 41.67

**B. David Louis Rodin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation SrDirector Proj Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-2906**  
 Amount of Each Receipt this Period 41.67

**C. Dawn D. Rogers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation Executive HR Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-1041**  
 Amount of Each Receipt this Period 104.17

**SUBTOTAL** of Receipts This Page (optional).....▶ 187.51  
**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 Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Dawn D. Rogers</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20150504105459-1033</b>
Name of Employer Pfizer Inc		Amount of Each Receipt this Period
Occupation Executive HR Leadership		104.17
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	833.36	

Full Name (Last, First, Middle Initial) <b>B. Michael H. Romano</b>		Date of Receipt
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015
City Atlanta	State GA	Zip Code 30338-7503
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 2015041610395-507</b>
Name of Employer Pfizer Inc		Amount of Each Receipt this Period
Occupation SrDirector Reg Mgmt Pharma		41.67
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	333.36	

Full Name (Last, First, Middle Initial) <b>C. Michael H. Romano</b>		Date of Receipt
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015
City Atlanta	State GA	Zip Code 30338-7503
FEC ID number of contributing federal political committee. C		<b>Transaction ID : 20150504105459-504</b>
Name of Employer Pfizer Inc		Amount of Each Receipt this Period
Occupation SrDirector Reg Mgmt Pharma		41.67
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	333.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (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 176 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Philip Henry Rose**  
Full Name (Last, First, Middle Initial)

Mailing Address 1855 Shelby Oaks Dr N  
Pfizer Inc

City Memphis State TN Zip Code 38134-7444

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

Name of Employer Pfizer Inc Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1229**

Amount of Each Receipt this Period  
41.67

**B. Philip Henry Rose**  
Full Name (Last, First, Middle Initial)

Mailing Address 1855 Shelby Oaks Dr N  
Pfizer Inc

City Memphis State TN Zip Code 38134-7444

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

Name of Employer Pfizer Inc Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1222**

Amount of Each Receipt this Period  
41.67

**C. Jason Craig Rosendaul**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 SIs Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2625**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.01

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Jason Craig Rosendaul**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-2607**

Amount of Each Receipt this Period  
**41.67**

**B. Mace Rothenberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-2681**

Amount of Each Receipt this Period  
**104.17**

**C. Mace Rothenberg**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-2663**

Amount of Each Receipt this Period  
**104.17**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **250.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Dennis Ryan**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Director Reg Mgmt Pharma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1579**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**B. Dennis Ryan**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Director Reg Mgmt Pharma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1568**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**C. Mary A. Ryder**

Mailing Address 1100 N Arlington Heights Rd  
Ste 400

City Itasca State IL Zip Code 60143-3111

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 SIs Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1499**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.01

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Mary A. Ryder**

Mailing Address 1100 N Arlington Heights Rd  
Ste 400

City Itasca State IL Zip Code 60143-3111

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1490**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**B. Francine Salamone**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-957**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**C. Francine Salamone**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-949**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.01

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 180 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Thomas A. Salamone</b>		Date of Receipt
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City Atlanta	State GA	Zip Code 30338-7503
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2015041610395-1028</b>
Name of Employer Pfizer Inc	Occupation SrDirector Reg Mgmt Pharma	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="41.67"/>
	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) <b>B. Thomas A. Salamone</b>		Date of Receipt
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City Atlanta	State GA	Zip Code 30338-7503
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150504105459-1020</b>
Name of Employer Pfizer Inc	Occupation SrDirector Reg Mgmt Pharma	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="41.67"/>
	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) <b>c. Megan G. San Juan</b>		Date of Receipt
Mailing Address 100 Route 206 North		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City Peapack	State NJ	Zip Code 07977
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2015041610395-1761</b>
Name of Employer Pfizer Inc	Occupation Director QAExternalSupply	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="41.67"/>
	<input type="text" value="333.36"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="125.01"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 181 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Megan G. San Juan**  
Full Name (Last, First, Middle Initial)

Mailing Address 100 Route 206 North

City Peapack State NJ Zip Code 07977

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

Name of Employer Pfizer Inc Occupation Director QAExternalSupply

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1751**

Amount of Each Receipt this Period  
**41.67**

**B. John Erik Sandstedt**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer, Inc. Occupation VPresident Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-3777**

Amount of Each Receipt this Period  
**104.17**

**C. John Erik Sandstedt**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer, Inc. Occupation VPresident Compliance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-3761**

Amount of Each Receipt this Period  
**104.17**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>250.01</b>
<b>TOTAL</b> This Period (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 182 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Thomas M. Sandvik**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pharmacia & Upjohn Company Occupation Sales/AM-3 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-199**

Amount of Each Receipt this Period  
41.67

**B. Thomas M. Sandvik**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pharmacia & Upjohn Company Occupation Sales/AM-3 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-197**

Amount of Each Receipt this Period  
41.67

**C. Stephen Sanger**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer, Inc. Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 085106AE46834671A636**

Amount of Each Receipt this Period  
1250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1333.34

**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 183 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Erich W. Sauerbrey**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 344.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1187**

Amount of Each Receipt this Period  
43.00

**B. Erich W. Sauerbrey**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 344.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1180**

Amount of Each Receipt this Period  
43.00

**C. Marc S. Scarduffa**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1004**

Amount of Each Receipt this Period  
208.33

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 294.33

**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: (check only one)	PAGE 184 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Marc S. Scarduffa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation SrDirector Govt Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-996**  
 Amount of Each Receipt this Period  
 208.33

**B. Henry R. Schaefer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 344.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-877**  
 Amount of Each Receipt this Period  
 43.00

**C. Henry R. Schaefer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 344.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-870**  
 Amount of Each Receipt this Period  
 43.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	294.33
<b>TOTAL</b> This Period (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 185 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Caroline Schellhas**

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-2904**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**B. Caroline Schellhas**

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-2888**

Amount of Each Receipt this Period  
**104.17**

Full Name (Last, First, Middle Initial)  
**C. Julie L. Schiffman**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Strat Planning

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-2135**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **250.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Julie L. Schiffman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation VPresident Strat Planning  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-2124**  
 Amount of Each Receipt this Period  
 41.67

**B. Andrew A. Schmeltz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 Giralda Farms  
 City Madison State NJ Zip Code 07940-1027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Executive Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-2076**  
 Amount of Each Receipt this Period  
 208.33

**C. Andrew A. Schmeltz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 Giralda Farms  
 City Madison State NJ Zip Code 07940-1027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Executive Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-2065**  
 Amount of Each Receipt this Period  
 208.33

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	458.33
<b>TOTAL</b> This Period (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 187 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Ryan David Schneider**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-1928**

Amount of Each Receipt this Period  
**41.67**

**B. Ryan David Schneider**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-1918**

Amount of Each Receipt this Period  
**41.67**

**C. Robert J. Schuster III**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pharmacia & Upjohn Company Occupation Sales/AM-5 Ar/RegAcMgtPhar

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-209**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... **125.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 188 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Robert J. Schuster III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pharmacia & Upjohn Company Occupation Sales/AM-5 Ar/RegAcMgtPhar  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-206**  
 Amount of Each Receipt this Period  
 41.67  
 Aggregate Year-to-Date ▼  
 333.36

**B. James C. Schwaninger Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 500 Arcola Rd  
 City Collegeville State PA Zip Code 19426-3982  
 Name of Employer Pfizer, Inc. Occupation SrDirector Prog/ProjMgmt  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-3122**  
 Amount of Each Receipt this Period  
 30.00  
 Aggregate Year-to-Date ▼  
 240.00

**C. James C. Schwaninger Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 500 Arcola Rd  
 City Collegeville State PA Zip Code 19426-3982  
 Name of Employer Pfizer, Inc. Occupation SrDirector Prog/ProjMgmt  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-3108**  
 Amount of Each Receipt this Period  
 30.00  
 Aggregate Year-to-Date ▼  
 240.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 101.67  
**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:	PAGE 189 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Timothy Scoggan**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-1145**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**B. Timothy Scoggan**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1137**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**c. Christopher G. Scully**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-899**

Amount of Each Receipt this Period  
**104.17**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **187.51**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 190 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Christopher G. Scully**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-893**

Amount of Each Receipt this Period  
104.17

**B. Chuck Shear**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer Inc Occupation VPresident ClinResClinicMD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1110**

Amount of Each Receipt this Period  
41.67

**C. Chuck Shear**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer Inc Occupation VPresident ClinResClinicMD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1102**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 187.51

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Christopher L. Sheffield</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-267</b>
Mailing Address 6465 Greenwood Plaza Blvd Ste 150		Amount of Each Receipt this Period 41.67
City Greenwood Village	State Zip Code CO 80111-4935	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 333.36
Name of Employer Pharmacia & Upjohn Company	Occupation Sales/AM-3 Sls Rep-Spec Ph	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>B. Christopher L. Sheffield</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-264</b>
Mailing Address 6465 Greenwood Plaza Blvd Ste 150		Amount of Each Receipt this Period 41.67
City Greenwood Village	State Zip Code CO 80111-4935	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 333.36
Name of Employer Pharmacia & Upjohn Company	Occupation Sales/AM-3 Sls Rep-Spec Ph	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) <b>C. Paul A. Shelton</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1685</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State Zip Code GA 30338-7503	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 333.36
Name of Employer Pfizer Inc	Occupation Sr Manager Strat Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (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 192 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Paul A. Shelton**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Strat Planning

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1675**

Amount of Each Receipt this Period  
41.67

**B. Daren J. Sink**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1288**

Amount of Each Receipt this Period  
41.67

**C. Daren J. Sink**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director Worldwide Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1281**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.01

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 254
	<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)  
**PFIZER INC. PAC**

**A. Deanna J. Skoviak**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-2253**  
 Amount of Each Receipt this Period 41.67

**B. Deanna J. Skoviak**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-2242**  
 Amount of Each Receipt this Period 41.67

**C. Christopher W. Slavinsky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pharmacia & Upjohn Company Occupation VPresident Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-364**  
 Amount of Each Receipt this Period 41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 125.01  
**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 Page	FOR LINE NUMBER:	PAGE 194 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Christopher W. Slavinsky**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pharmacia & Upjohn Company Occupation VPresident Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-361**  
 Amount of Each Receipt this Period 41.67

**B. Cedric J. Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation Director Bus Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-1701**  
 Amount of Each Receipt this Period 104.17

**C. Cedric J. Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pfizer Inc Occupation Director Bus Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-1691**  
 Amount of Each Receipt this Period 104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.01  
**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 Page	FOR LINE NUMBER:	PAGE 195 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Christine E. Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 700 Chesterfield Pkwy W  
Pfizer

City Chesterfield State MO Zip Code 63017-1732

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

Name of Employer Pharmacia & Upjohn Company Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-123**

Amount of Each Receipt this Period  
30.00

**B. Christine E. Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 700 Chesterfield Pkwy W  
Pfizer

City Chesterfield State MO Zip Code 63017-1732

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

Name of Employer Pharmacia & Upjohn Company Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-122**

Amount of Each Receipt this Period  
30.00

**C. David S. Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Platform Support

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1802**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 164.17

**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 196 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. David S. Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Platform Support

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1792**

Amount of Each Receipt this Period  
104.17

**B. James Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : A2D09D7A3C4E41FFB5F2**

Amount of Each Receipt this Period  
1250.00

**C. Robert J. Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer, Inc. Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-3292**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1458.34

**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 197 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Robert J. Smith**

Mailing Address 500 Arcola Rd

City State Zip Code  
Collegeville PA 19426-3982

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

Name of Employer Occupation  
Pfizer, Inc. Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-3278**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**B. Daniel Solomon**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City State Zip Code  
Greenwood Village CO 80111-4935

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

Name of Employer Occupation  
Pfizer Inc Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2423**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**C. Daniel Solomon**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City State Zip Code  
Greenwood Village CO 80111-4935

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

Name of Employer Occupation  
Pfizer Inc Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2410**

Amount of Each Receipt this Period  
104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 312.51

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Dominick V. Spatafora</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2693</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 583.37
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director Worldwide Policy	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 583.37		

Full Name (Last, First, Middle Initial) <b>B. Dominick V. Spatafora</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-2675</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 583.37
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director Worldwide Policy	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 583.37		

Full Name (Last, First, Middle Initial) <b>C. James C. Spavins</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-962</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 104.17
City Groton	State CT	
Zip Code 06340-5146		Aggregate Year-to-Date ▼ 833.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Executive Leadership	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 833.36		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	312.51
<b>TOTAL</b> This Period (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 199 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. James C. Spavins</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-954</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 104.17
City Groton State CT Zip Code 06340-5146	FEC ID number of contributing federal political committee. C	
Name of Employer Pfizer Inc Occupation Executive Leadership	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36

Full Name (Last, First, Middle Initial) <b>B. Russell Tamiesie Spencer</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1901</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York State NY Zip Code 10017-5703	FEC ID number of contributing federal political committee. C	
Name of Employer Pfizer Inc Occupation Director Worldwide Policy	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36

Full Name (Last, First, Middle Initial) <b>C. Russell Tamiesie Spencer</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1891</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York State NY Zip Code 10017-5703	FEC ID number of contributing federal political committee. C	
Name of Employer Pfizer Inc Occupation Director Worldwide Policy	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	312.51
<b>TOTAL</b> This Period (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 200 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Elina Srulevitch-Chin**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector ApprovLiaison

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-965**

Amount of Each Receipt this Period  
104.17

**B. Elina Srulevitch-Chin**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector ApprovLiaison

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-957**

Amount of Each Receipt this Period  
104.17

**C. William S. Stafford**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Sales/AM-5 Nat'lKeyActPharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1018**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.01

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 254
	<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)  
**PFIZER INC. PAC**

**A. William S. Stafford**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation Sales/AM-5 Nat'l Key Act Pharm  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-1010**  
 Amount of Each Receipt this Period  
 41.67  
 Aggregate Year-to-Date  
 333.36

**B. Nancy Steele**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation VPresident Strat Planning  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-1354**  
 Amount of Each Receipt this Period  
 104.17  
 Aggregate Year-to-Date  
 833.36

**C. Nancy Steele**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation VPresident Strat Planning  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-1346**  
 Amount of Each Receipt this Period  
 104.17  
 Aggregate Year-to-Date  
 833.36

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.01  
**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 Page	FOR LINE NUMBER: (check only one)	PAGE 202 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Kim M. Stepanski**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Talent&OrgCap

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
04 / 10 / 2015  
**Transaction ID : 48D208FE-B9DD-4822-**

Amount of Each Receipt this Period  
500.00

**B. Nancy L. Sternberg-Oakland**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pharmacia & Upjohn Company Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
246.72

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-249**

Amount of Each Receipt this Period  
30.84

**C. Nancy L. Sternberg-Oakland**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pharmacia & Upjohn Company Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
246.72

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-246**

Amount of Each Receipt this Period  
30.84

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 561.68

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Scott Stevenson</b>		Date of Receipt 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2319</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State GA	
Zip Code 30338-7503		Aggregate Year-to-Date ▼ 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Sales/AM-2 Sls Rep-Spec Ph	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Scott Stevenson</b>		Date of Receipt 04 / 30 / 2015 <b>Transaction ID : 20150504105459-2307</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 41.67
City Atlanta	State GA	
Zip Code 30338-7503		Aggregate Year-to-Date ▼ 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Sales/AM-2 Sls Rep-Spec Ph	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Donald S. Stewart</b>		Date of Receipt 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1043</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 833.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Executive HR Leadership	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (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 204 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Donald S. Stewart**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive HR Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-1035**

Amount of Each Receipt this Period  
**104.17**

**B. Gordon B. Stewart**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Comm Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-891**

Amount of Each Receipt this Period  
**104.17**

**C. Gordon B. Stewart**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Comm Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-885**

Amount of Each Receipt this Period  
**104.17**

**SUBTOTAL** of Receipts This Page (optional)..... **312.51**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 205 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Paul C. Stuart</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-828</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 50.00
City Groton	State CT Zip Code 06340-5146	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 400.00
Name of Employer Pfizer Inc	Occupation VPresident Leadership	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Paul C. Stuart</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-821</b>
Mailing Address Groton Plant and Research Center Eastern Point Road		Amount of Each Receipt this Period 50.00
City Groton	State CT Zip Code 06340-5146	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 400.00
Name of Employer Pfizer Inc	Occupation VPresident Leadership	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Patrick Neal Sullivan</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-152</b>
Mailing Address 6465 Greenwood Plaza Blvd Ste 150		Amount of Each Receipt this Period 104.17
City Greenwood Village	State CO Zip Code 80111-4935	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 833.36
Name of Employer Pharmacia & Upjohn Company	Occupation Sales/AM-4 Nat'lKeyActPharm	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	204.17
<b>TOTAL</b> This Period (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 206 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Patrick Neal Sullivan**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pharmacia & Upjohn Company Occupation Sales/AM-4 Nat'l Key Act Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-151**

Amount of Each Receipt this Period  
104.17

Full Name (Last, First, Middle Initial)  
**B. Sally Susman**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Top Comms Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.72

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2635**

Amount of Each Receipt this Period  
208.34

Full Name (Last, First, Middle Initial)  
**C. Sally Susman**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Top Comms Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.72

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2617**

Amount of Each Receipt this Period  
208.34

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.85

**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: (check only one)	PAGE 207 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Jennifer Anne Swenson**  
Full Name (Last, First, Middle Initial)

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-2870**

Amount of Each Receipt this Period  
208.33

**B. Jennifer Anne Swenson**  
Full Name (Last, First, Middle Initial)

Mailing Address Pfizer Inc  
Corporate Affairs/Govt Relatns

City Washington State DC Zip Code 20004

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

Name of Employer Pfizer Inc Occupation SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2853**

Amount of Each Receipt this Period  
208.33

**C. Menassie M. Taddese**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Fin'I Plan&Anal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1125**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 458.33

**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: (check only one)	PAGE 208 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Menassie M. Taddese**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Fin'l Plan&Anal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1117**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**B. Myron K. Terry**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1923**

Amount of Each Receipt this Period  
208.33

Full Name (Last, First, Middle Initial)  
**C. Myron K. Terry**

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation SrDirector Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1913**

Amount of Each Receipt this Period  
208.33

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 458.33

**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 209 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Chris J. Thompson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-560</b>
Mailing Address 6465 Greenwood Plaza Blvd Ste 150		Amount of Each Receipt this Period 41.67
City Greenwood Village	State CO	
Zip Code 80111-4935		Aggregate Year-to-Date ▼ 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director Reg Mgmt Pharma	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 333.36		

Full Name (Last, First, Middle Initial) <b>B. Chris J. Thompson</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-556</b>
Mailing Address 6465 Greenwood Plaza Blvd Ste 150		Amount of Each Receipt this Period 41.67
City Greenwood Village	State CO	
Zip Code 80111-4935		Aggregate Year-to-Date ▼ 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director Reg Mgmt Pharma	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 333.36		

Full Name (Last, First, Middle Initial) <b>C. Bartholomew Joseph Tortella</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2846</b>
Mailing Address 500 Arcola Rd		Amount of Each Receipt this Period 208.33
City Collegeville	State PA	
Zip Code 19426-3982		Aggregate Year-to-Date ▼ 1666.64
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation SrDirector FldMedMedLiasNMD	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Aggregate Year-to-Date ▼ 1666.64		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	291.67
<b>TOTAL</b> This Period (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 210 OF 254
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Bartholomew Joseph Tortella**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 500 Arcola Rd  
 City State Zip Code  
 Collegeville PA 19426-3982  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Pfizer Inc SrDirector FldMedMedLiasNMD  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1666.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-2829**  
 Amount of Each Receipt this Period  
 208.33

**B. Elise Trent**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City State Zip Code  
 New York NY 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Pfizer Inc Sr Manager BU Communication  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-3072**  
 Amount of Each Receipt this Period  
 41.67

**C. Elise Trent**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City State Zip Code  
 New York NY 10017-5703  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Pfizer Inc Sr Manager BU Communication  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-3056**  
 Amount of Each Receipt this Period  
 41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 291.67  
**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 211 OF 254
	<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)  
**PFIZER INC. PAC**

**A. Stephen L. Tufts**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 412.64

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-621**  
 Amount of Each Receipt this Period 51.58

**B. Stephen L. Tufts**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 412.64

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-615**  
 Amount of Each Receipt this Period 51.58

**C. James A. Turner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Groton Plant and Research Center  
 Eastern Point Road  
 City Groton State CT Zip Code 06340-5146  
 Name of Employer Pfizer Inc Occupation Director Ops Mgmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 291.69

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-817**  
 Amount of Each Receipt this Period 41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 144.83  
**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 212 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. James A. Turner**

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation Director Ops Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
291.69

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-810**

Amount of Each Receipt this Period  
41.67

Full Name (Last, First, Middle Initial)  
**B. Thomas Upp**

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1268**

Amount of Each Receipt this Period  
26.00

Full Name (Last, First, Middle Initial)  
**C. Jimmie D. Vail Jr.**

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1552**

Amount of Each Receipt this Period  
41.67

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 109.34

**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 213 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Jimmie D. Vail Jr.**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1541**

Amount of Each Receipt this Period  
41.67

**B. Lisa L. Vail**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-1312**

Amount of Each Receipt this Period  
33.00

**C. Lisa L. Vail**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sales/AM-2 Sls Rep-Spec Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-1304**

Amount of Each Receipt this Period  
33.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 107.67

**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 214 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Christopher C. Valentine**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6465 Greenwood Plaza Blvd  
 Ste 150  
 City Greenwood Village State CO Zip Code 80111-4935  
 Name of Employer Pfizer Inc Occupation Sales/AM-3 Sls Rep-Spec Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-960**  
 Amount of Each Receipt this Period 50.00

**B. William E. Vance**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pharmacia & Upjohn Company Occupation Sales/AM-3 Sls Rep-Pcare Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-305**  
 Amount of Each Receipt this Period 41.67

**C. William E. Vance**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 Name of Employer Pharmacia & Upjohn Company Occupation Sales/AM-3 Sls Rep-Pcare Ph  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-302**  
 Amount of Each Receipt this Period 41.67

**SUBTOTAL** of Receipts This Page (optional).....▶ 133.34  
**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 215 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)  
**A. Grace M. Vandal**

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation Director ProjMgmt-ClinRes

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **688.35**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-925**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**B. Grace M. Vandal**

Mailing Address Groton Plant and Research Center  
Eastern Point Road

City Groton State CT Zip Code 06340-5146

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

Name of Employer Pfizer Inc Occupation Director ProjMgmt-ClinRes

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **688.35**

Date of Receipt  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-918**

Amount of Each Receipt this Period  
**41.67**

Full Name (Last, First, Middle Initial)  
**C. Mark Andrew Vaughan**

Mailing Address 1211 Sherwood Ave

City Richmond State VA Zip Code 23220-1212

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

Name of Employer Pfizer, Inc. Occupation SrScien'st Proc Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-3829**

Amount of Each Receipt this Period  
**41.67**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **125.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 216 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Mark Andrew Vaughan**  
Full Name (Last, First, Middle Initial)

Mailing Address 1211 Sherwood Ave

City Richmond State VA Zip Code 23220-1212

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

Name of Employer Pfizer, Inc. Occupation SrScien'st Proc Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-3813**

Amount of Each Receipt this Period  
**41.67**

**B. Anabella Villalobos**  
Full Name (Last, First, Middle Initial)

Mailing Address 610 Main St

City Cambridge State MA Zip Code 02139-3526

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

Name of Employer Pfizer Inc Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**  
**Transaction ID : 2015041610395-1563**

Amount of Each Receipt this Period  
**104.17**

**C. Anabella Villalobos**  
Full Name (Last, First, Middle Initial)

Mailing Address 610 Main St

City Cambridge State MA Zip Code 02139-3526

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

Name of Employer Pfizer Inc Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**  
**Transaction ID : 20150504105459-1552**

Amount of Each Receipt this Period  
**104.17**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **250.01**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Jyotin J. Vyas</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1708</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 41.67
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director Business Analyst	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Jyotin J. Vyas</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1698</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 41.67
City New York	State NY	
Zip Code 10017-5703		Aggregate Year-to-Date ▼ 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director Business Analyst	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Christopher Wahlmeier</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2710</b>
Mailing Address 6465 Greenwood Plaza Blvd Ste 150		Amount of Each Receipt this Period 100.00
City Greenwood Village	State CO	
Zip Code 80111-4935		Aggregate Year-to-Date ▼ 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer, Inc	Occupation Sales/AM-3 SIs Rep-Pcare Ph	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	183.34
<b>TOTAL</b> This Period (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 218 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Christopher Wahlmeier**  
Full Name (Last, First, Middle Initial)

Mailing Address 6465 Greenwood Plaza Blvd  
Ste 150

City Greenwood Village State CO Zip Code 80111-4935

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

Name of Employer Pfizer, Inc Occupation Sales/AM-3 Sls Rep-Pcare Ph

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-2691**

Amount of Each Receipt this Period  
100.00

**B. Roy Waldron**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 15 / 2015  
**Transaction ID : 2015041610395-758**

Amount of Each Receipt this Period  
208.33

**C. Roy Waldron**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015  
**Transaction ID : 20150504105459-751**

Amount of Each Receipt this Period  
208.33

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 516.66

**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: (check only one)	PAGE 219 OF 254
	<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)  
**PFIZER INC. PAC**

**A. Kathleen M. Walsh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation SrDirector Reg Mgmt Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 729.19

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-1350**  
 Amount of Each Receipt this Period  
 104.17

**B. Kathleen M. Walsh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 Perimeter Walk  
 Pfizer Regional Mgmt Office  
 City Atlanta State GA Zip Code 30338-7503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation SrDirector Reg Mgmt Pharma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 729.19

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : 20150504105459-1342**  
 Amount of Each Receipt this Period  
 104.17

**C. Mary Bridget Walsh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Pfizer Inc  
 Corporate Affairs/Govt Relatns  
 City Washington State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pfizer Inc Occupation VPresident Govt Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2015  
**Transaction ID : 2015041610395-2868**  
 Amount of Each Receipt this Period  
 104.17

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	312.51
<b>TOTAL</b> This Period (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 220 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Mary Bridget Walsh</b>		Date of Receipt
Mailing Address Pfizer Inc Corporate Affairs/Govt Relatns		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City Washington State DC Zip Code 20004		<b>Transaction ID : 20150504105459-2851</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Pfizer Inc Occupation VPresident Govt Relations		<input type="text" value="104.17"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="833.36"/>	

Full Name (Last, First, Middle Initial) <b>B. James M. Warner</b>		Date of Receipt
Mailing Address 230 E Grand Ave		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City South San Francisc State CA Zip Code 94080-4811		<b>Transaction ID : 2015041610395-42</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Pharmacia & Upjohn Company Occupation SrDirector Platform Support		<input type="text" value="41.67"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) <b>C. James M. Warner</b>		Date of Receipt
Mailing Address 230 E Grand Ave		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City South San Francisc State CA Zip Code 94080-4811		<b>Transaction ID : 20150504105459-42</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer Pharmacia & Upjohn Company Occupation SrDirector Platform Support		<input type="text" value="41.67"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="333.36"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="187.51"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 221 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. John T. Watters**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-1011**

Amount of Each Receipt this Period  
**104.17**

**B. John T. Watters**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer Inc Occupation VPresident Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1003**

Amount of Each Receipt this Period  
**104.17**

**C. Carl D. Wilbanks**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Executive Leadership

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-1211**

Amount of Each Receipt this Period  
**104.17**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **312.51**

**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 Page	FOR LINE NUMBER: (check only one)	PAGE 222 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Carl D. Wilbanks</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1204</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 104.17
City Atlanta	State GA	
Zip Code 30338-7503		Aggregate Year-to-Date ▼ 833.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Executive Leadership	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Dean A. Willeford</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-524</b>
Mailing Address 1100 N Arlington Heights Rd Ste 400		Amount of Each Receipt this Period 41.67
City Itasca	State IL	
Zip Code 60143-3111		Aggregate Year-to-Date ▼ 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Sr Manager Dist Mgmt-Pharm	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Dean A. Willeford</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-521</b>
Mailing Address 1100 N Arlington Heights Rd Ste 400		Amount of Each Receipt this Period 41.67
City Itasca	State IL	
Zip Code 60143-3111		Aggregate Year-to-Date ▼ 333.36
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Sr Manager Dist Mgmt-Pharm	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (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 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Johnny L. Williams Jr.</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1249</b>
Mailing Address 1100 N Arlington Heights Rd Ste 400		Amount of Each Receipt this Period 41.67
City Itasca	State IL	
Zip Code 60143-3111		Amount of Each Receipt this Period 41.67
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director Reg Mgmt Pharma	Amount of Each Receipt this Period 41.67
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name (Last, First, Middle Initial) <b>B. Johnny L. Williams Jr.</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2015 <b>Transaction ID : 20150504105459-1242</b>
Mailing Address 1100 N Arlington Heights Rd Ste 400		Amount of Each Receipt this Period 41.67
City Itasca	State IL	
Zip Code 60143-3111		Amount of Each Receipt this Period 41.67
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer Inc	Occupation Director Reg Mgmt Pharma	Amount of Each Receipt this Period 41.67
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name (Last, First, Middle Initial) <b>C. Molly Kathleen Williams</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2015 <b>Transaction ID : 2015041610395-3846</b>
Mailing Address 235 E 42nd St Pfizer Inc		Amount of Each Receipt this Period 104.17
City New York	State NY	
Zip Code 10017-5703		Amount of Each Receipt this Period 104.17
FEC ID number of contributing federal political committee. C		
Name of Employer Pfizer, Inc.	Occupation Director Govt Relations	Amount of Each Receipt this Period 104.17
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (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 224 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Molly Kathleen Williams**  
Full Name (Last, First, Middle Initial)

Mailing Address 235 E 42nd St  
Pfizer Inc

City New York State NY Zip Code 10017-5703

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

Name of Employer Pfizer, Inc. Occupation Director Govt Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-3830**

Amount of Each Receipt this Period  
**104.17**

**B. Robert S. Williams**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Director Reg Mgmt Pharma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 15 / 2015**

**Transaction ID : 2015041610395-1255**

Amount of Each Receipt this Period  
**41.67**

**C. Robert S. Williams**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Director Reg Mgmt Pharma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **333.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : 20150504105459-1248**

Amount of Each Receipt this Period  
**41.67**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>187.51</b>
<b>TOTAL</b> This Period (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 225 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Anne Elizabeth Wilson</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-2134</b>
Mailing Address Pfizer Inc Corporate Affairs/Govt Relatns		Amount of Each Receipt this Period 104.17
City Washington	State DC	
Zip Code 20004	FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 833.36
Name of Employer Pfizer Inc	Occupation SrDirector Worldwide Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Anne Elizabeth Wilson</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 <b>Transaction ID : 20150504105459-2123</b>
Mailing Address Pfizer Inc Corporate Affairs/Govt Relatns		Amount of Each Receipt this Period 104.17
City Washington	State DC	
Zip Code 20004	FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 833.36
Name of Employer Pfizer Inc	Occupation SrDirector Worldwide Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. James D. Woods</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 <b>Transaction ID : 2015041610395-1163</b>
Mailing Address 400 Perimeter Walk Pfizer Regional Mgmt Office		Amount of Each Receipt this Period 45.00
City Atlanta	State GA	
Zip Code 30338-7503	FEC ID number of contributing federal political committee. C	Aggregate Year-to-Date ▼ 360.00
Name of Employer Pfizer Inc	Occupation Sr Manager Dist Mgmt-Pharm	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	253.34
<b>TOTAL</b> This Period (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 226 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. James D. Woods**  
Full Name (Last, First, Middle Initial)

Mailing Address 400 Perimeter Walk  
Pfizer Regional Mgmt Office

City Atlanta State GA Zip Code 30338-7503

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

Name of Employer Pfizer Inc Occupation Sr Manager Dist Mgmt-Pharm

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-1155**

Amount of Each Receipt this Period  
**45.00**

**B. Bryon Wornson**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer Inc Occupation VPresident Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 15 / 2015**  
Transaction ID : **2015041610395-2357**

Amount of Each Receipt this Period  
**104.17**

**C. Bryon Wornson**  
Full Name (Last, First, Middle Initial)

Mailing Address 500 Arcola Rd

City Collegeville State PA Zip Code 19426-3982

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

Name of Employer Pfizer Inc Occupation VPresident Public Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **833.36**

Date of Receipt  
**04 / 30 / 2015**  
Transaction ID : **20150504105459-2344**

Amount of Each Receipt this Period  
**104.17**

**SUBTOTAL** of Receipts This Page (optional)..... **253.34**

**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 227 OF 254
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Terry J. Wright</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2015041610395-1302</b>
Name of Employer Pfizer Inc		Amount of Each Receipt this Period
Occupation VPresident Trans Processing		<input type="text" value="41.67"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) <b>B. Terry J. Wright</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20150504105459-1295</b>
Name of Employer Pfizer Inc		Amount of Each Receipt this Period
Occupation VPresident Trans Processing		<input type="text" value="41.67"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) <b>c. John T. Zgombic</b>		Date of Receipt
Mailing Address 235 E 42nd St Pfizer Inc		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City New York	State NY	Zip Code 10017-5703
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2015041610395-68</b>
Name of Employer Pharmacia & Upjohn Company		Amount of Each Receipt this Period
Occupation Director STRngCuri/ConD-P		<input type="text" value="41.67"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="333.36"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="125.01"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 228 OF 254
	<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)  
**PFIZER INC. PAC**

**A. John T. Zgombic**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 235 E 42nd St  
 Pfizer Inc  
 City New York State NY Zip Code 10017-5703  
 Name of Employer Pharmacia & Upjohn Company Occupation Director STRngCuri/ConD-P  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-67**  
 Amount of Each Receipt this Period 41.67

**B. Susan E. Zimbelmann**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Groton Plant and Research Center  
 Eastern Point Road  
 City Groton State CT Zip Code 06340-5146  
 Name of Employer Pfizer Inc Occupation VPresident Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 15 / 2015  
**Transaction ID : 2015041610395-900**  
 Amount of Each Receipt this Period 104.17

**C. Susan E. Zimbelmann**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Groton Plant and Research Center  
 Eastern Point Road  
 City Groton State CT Zip Code 06340-5146  
 Name of Employer Pfizer Inc Occupation VPresident Leadership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : 20150504105459-894**  
 Amount of Each Receipt this Period 104.17

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.01  
**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 Page	FOR LINE NUMBER:	PAGE 229 OF 254
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Janet L. Zlomek</b>		Date of Receipt
Mailing Address 7000 Portage Rd		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
Kalamazoo	MI	49001-0102
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 2015041610395-91</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pharmacia & Upjohn Company	Director DrugProductMfg	<input type="text" value="41.67"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) <b>B. Janet L. Zlomek</b>		Date of Receipt
Mailing Address 7000 Portage Rd		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City	State	Zip Code
Kalamazoo	MI	49001-0102
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : 20150504105459-90</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pharmacia & Upjohn Company	Director DrugProductMfg	<input type="text" value="41.67"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="333.36"/>	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="83.34"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="60775.98"/>

# 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 230 OF 254
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<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)  
**PFIZER INC. PAC**

**A. Pfizer Inc**  
Full Name (Last, First, Middle Initial)  
Mailing Address 235 East 42nd Street  
City New York State NY Zip Code 10017  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ **72.35**

Date of Receipt **04 / 23 / 2015**  
**Transaction ID : AEF29546D894544A6FD**  
Amount of Each Receipt this Period **16.78**  
Re-Imbursement of April 2015 Operating Expenditures

**B.**  
Full Name (Last, First, Middle Initial)  
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  
Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
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  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>16.78</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>16.78</b>

**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"/> 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

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Bucshon for Congress**

Mailing Address PO Box 250

City Newburgh State IN Zip Code 47629

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Larry Dean Bucshon**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IN District: 08

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : 961F-45B8-B262-567F5**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Carper for Senate**

Mailing Address PO Box 2882

City Wilmington State DE Zip Code 19805

Purpose of Disbursement  
2018 Primay

011

Candidate Name

**Thomas Richard Carper**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: DE District:

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : 583A-4A2C-A998-F13ED**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Castro for Congress**

Mailing Address PO Box 544

City San Antonio State TX Zip Code 78292

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Joaquin Castro**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TX District: 20

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : BF88-49B6-8BC8-0E1BC**

Amount of Each Disbursement this Period

1000.00

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

4500.00

**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"/> 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

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Charles Boustany Jr. MD for Congress, Inc.**

Mailing Address PO Box 80126

City Lafayette State LA Zip Code 70598-0126

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Charles William Boustany Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: LA District: 03

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : CA19-4242-923B-CDC64**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Committee To Re-Elect Linda Sanchez**

Mailing Address 410 1st St SE  
Suite 310

City Washington State DC Zip Code 20003

Purpose of Disbursement  
2016 General

011

Candidate Name

**Linda T. Sanchez**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 38

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : FA69-4C4E-B8BD-761CB**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Committee To Re-Elect Loretta Sanchez**

Mailing Address PO Box 6037

City Santa Ana State CA Zip Code 92706

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Loretta L. Sanchez**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 46

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : FE21-4629-869E-627BF**

Amount of Each Disbursement this Period

3000.00

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

5000.00

**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"/> 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

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Cory Booker for Senate**

Mailing Address PO Box 32237

City Newark State NJ Zip Code 07102

Purpose of Disbursement  
2020 Primary

011

Candidate Name

**Cory Anthony Booker**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: NJ District:

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

Transaction ID : **D59E-482B-B1B5-59212**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Council for Responsible Nutrition Political Action Committee**

Mailing Address 1828 L Street, NW  
Suite 510

City Washington State DC Zip Code 20036-5114

Purpose of Disbursement  
2015 Contribution

011

Candidate Name

**Council for Responsible Nutrition Political Action Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼ Contribution

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

Transaction ID : **520C-446B-BBF2-754A5**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Donovan for Congress**

Mailing Address 440 Leverett Avenue

City Staten Island State NY Zip Code 10308

Purpose of Disbursement  
2015 Special General

011

Candidate Name

**Daniel M. Donovan**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: NY District: 11

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

Transaction ID : **B061-48AD-95B5-772F0**

Amount of Each Disbursement this Period

1000.00

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

5000.00

**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"/> 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

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Roy Blunt**

Mailing Address PO Box 10178

City Columbia State MO Zip Code 65205-4002

Purpose of Disbursement  
2016 General

011

Candidate Name

**Roy Dean Blunt**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MO District:

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

Transaction ID : 71C4-4A4C-A08B-08426

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Friends of Susan Brooks**

Mailing Address 9425 N Meridian Street  
# 237

City Indianapolis State IN Zip Code 46260-1308

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Susan W. Brooks**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IN District: 05

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

Transaction ID : 876D-4411-AEF1-F4F62

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Friends of Todd Young, Inc.**

Mailing Address PO Box 1053

City Bloomington State IN Zip Code 47402

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Todd Christopher Young**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IN District: 09

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

Transaction ID : 3A5E-43DF-9EAA-5EB9D

Amount of Each Disbursement this Period

2500.00

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

4500.00

**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"/> 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

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Gallego for Arizona**

Mailing Address PO Box 1710

City Phoenix State AZ Zip Code 85001

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Ruben M. Gallego**

Category/  
Type

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : 84BF-4FDE-A31C-09B83**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Georgians for Isakson**

Mailing Address Post Office Box 250116

City Atlanta State GA Zip Code 30325

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Johnny H. Isakson**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: GA District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : 962D-4C19-A4F2-E4E02**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Georgians for Isakson**

Mailing Address Post Office Box 250116

City Atlanta State GA Zip Code 30325

Purpose of Disbursement  
2016 General

011

Candidate Name

**Johnny H. Isakson**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: GA District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : 2F70-42BC-BFFE-1B4F9**

Amount of Each Disbursement this Period

500.00

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

3500.00

**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"/> 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

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Grace for New York**

Mailing Address PO Box 656555

City Fresh Meadows State NY Zip Code 11365

Purpose of Disbursement  
2016 Primary

011

Category/  
Type

Candidate Name  
**Grace Meng**

Office Sought:  House  
 Senate  
 President  
State: NY District: 06

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

Transaction ID : 780D-47B7-A9DA-5B6F2

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Hellerhighwater PAC**

Mailing Address PO Box 370672

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement  
2015 Contribution

011

Category/  
Type

Candidate Name  
**Hellerhighwater PAC**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼ Contribution

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

Transaction ID : A6A6-4A2F-984C-8861E

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Hoyer for Congress**

Mailing Address 700 13th Street NW  
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement  
2016 Primary

011

Category/  
Type

Candidate Name  
**Steny Hamilton Hoyer**

Office Sought:  House  
 Senate  
 President  
State: MD District: 05

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

Transaction ID : D770-456B-B1DA-3A7C0

Amount of Each Disbursement this Period

1500.00

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

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

5000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Joe Kennedy for Congress**

Mailing Address PO Box 590464

City Newton State MA Zip Code 02459

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Joseph Patrick Kennedy III**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MA District: 04

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : 4DA7-470C-91CD-A2B8B**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Kevin McCarthy for Congress**

Mailing Address PO Box 12667

City Bakersfield State CA Zip Code 93389-2667

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Kevin Owen McCarthy**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 23

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : 35CB-4B71-B10E-CC8FD**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Mike Honda for Congress**

Mailing Address C/O Contribution Solutions, Llc  
300 S. First Street, Suite 350

City San Jose State CA Zip Code 95113

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Michael M. Honda**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 17

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : 06FB-4BE3-919D-EC88E**

Amount of Each Disbursement this Period

1000.00

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

4500.00

**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"/> 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

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. People for Patty Murray**

Mailing Address PO Box 3662

City State Zip Code  
Seattle WA 98124

Purpose of Disbursement  
2016 General

011

Candidate Name

**Patricia Lynn Murray**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2015

Transaction ID : ED8D-4CE9-A1F4-5E232

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. People for Patty Murray**

Mailing Address PO Box 3662

City State Zip Code  
Seattle WA 98124

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Patricia Lynn Murray**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WA District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2015

Transaction ID : 8BAC-4EF4-B316-520CD

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**C. Portman for Senate Committee**

Mailing Address 9856 Archer Lane

City State Zip Code  
Dublin OH 43017-8914

Purpose of Disbursement  
2016 General

011

Candidate Name

**Rob J. Portman**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OH District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 22 / 2015

Transaction ID : B19B-4523-8A46-B2226

Amount of Each Disbursement this Period

500.00

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

3000.00

**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"/> 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

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Republican Mainstreet Partnership PAC**

Mailing Address C/O G & W 2201 Wisconsin Ave., NW  
Suite 320

City Washington State DC Zip Code 20007

Purpose of Disbursement  
2015 Contribution

011

Candidate Name

**Republican Mainstreet Partnership PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : 5377-4362-9B2C-61C74**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Ryan for Congress, Inc.**

Mailing Address PO Box 1488

City Janesville State WI Zip Code 53547-1488

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Paul Davis Ryan Jr.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) **Contribution**

State: WI District: 01

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : 3A15-40BD-9B45-D5218**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. Tenn Political Action Committee Inc (TENN PAC)**

Mailing Address 228 S Washington Street Suite 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
2015 Contribution

011

Candidate Name

**Tenn Political Action Committee Inc (TENN PAC)**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) **Contribution**

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 22 / 2015

**Transaction ID : 2CBD-4004-B5F3-A9B24**

Amount of Each Disbursement this Period

2500.00

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

10500.00

**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"/> 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

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Texans for Henry Cuellar Congressional Campaign**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		22		2015

Mailing Address 1519 Washington Street  
Suite 200

**Transaction ID : 6F49-4447-9170-59455**

City Laredo State TX Zip Code 78040

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
2016 Primary

011
Category/ Type

Candidate Name

**Henry Roberto Cuellar**

Office Sought:  House  
 Senate  
 President  
State: TX District: 28

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Tiberi for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		22		2015

Mailing Address 2931 E Dublin Granville Road  
Suite 190

**Transaction ID : C5D2-4A88-B40A-76BDC**

City Columbus State OH Zip Code 43231-2098

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
2016 Primary

011
Category/ Type

Candidate Name

**Patrick Joseph Tiberi**

Office Sought:  House  
 Senate  
 President  
State: OH District: 12

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Tim Scott for Senate**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		22		2015

Mailing Address 1405 Ashley River Road

**Transaction ID : 6266-49F7-8F98-E2348**

City Charleston State SC Zip Code 29407-5305

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
2016 Primary

011
Category/ Type

Candidate Name

**Timothy Eugene Scott**

Office Sought:  House  
 Senate  
 President  
State: SC District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

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

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

4500.00
---------

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**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"/> 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

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Volunteers for Shimkus**

Mailing Address PO Box 661

City Collinsville State IL Zip Code 62234-0661

Purpose of Disbursement  
2016 Primary

**011**  
Category/  
Type

Candidate Name

**John M. Shimkus**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 15

Date of Disbursement

/  /

**Transaction ID : 4B71-448E-8AC6-7F23E**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Walden for Congress**

Mailing Address PO Box 1091

City Hood River State OR Zip Code 97031-0037

Purpose of Disbursement  
2016 Primary

**011**  
Category/  
Type

Candidate Name

**Gregory Paul Walden**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District: 02

Date of Disbursement

/  /

**Transaction ID : F27B-487B-8822-CDE59**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Wyden for Senate**

Mailing Address 232 NE 9th Avenue

City Portland State OR Zip Code 97232

Purpose of Disbursement  
2016 General

**011**  
Category/  
Type

Candidate Name

**Ron L. Wyden**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

/  /

**Transaction ID : 3225-4F10-96E8-A5A1E**

Amount of Each Disbursement this Period

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

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Butler for Ohio**

Mailing Address 2321 Miami Village Dr.

City State Zip Code  
Miamisburg OH 45342

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015

Transaction ID : 67B5-4124-A093-0F49B

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**B. Citizens for Anne Gonzales**

Mailing Address 865 Macon Alley

City State Zip Code  
Columbus OH 43026

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015

Transaction ID : FA8F-4567-829A-4A64F

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Citizens for Bishoff**

Mailing Address 2902 Braden Way

City State Zip Code  
Blacklick OH 43004

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015

Transaction ID : 520E-46E6-84F3-3570F

Amount of Each Disbursement this Period

350.00

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

1600.00

**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)

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

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Citizens for Brown**

Mailing Address 2352 Homestead Dr.

City Perrysburg State OH Zip Code 43551

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : E054-4F40-89D3-9F191

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Citizens for Duffey**

Mailing Address 645 Farrington Dr.

City Worthington State OH Zip Code 43085

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : 1E3C-4B7A-9402-4219D

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Citizens for Schuring Committee**

Mailing Address 1817 Devonshire Drive, NW

City Canton State OH Zip Code 44708

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : F2D1-4804-A0C7-A3CBC

Amount of Each Disbursement this Period

500.00

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

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

1500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Citizens for Sears**

Mailing Address 6711 Monroe Street  
Suite D

City State Zip Code  
Sylvania OH 43560

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015

Transaction ID : 6519-4264-A028-2FFF0

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Citizens to Elect Ron Maag State Representative**

Mailing Address 2075 South St., Rt. 123

City State Zip Code  
Lebanon OH 45036

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015

Transaction ID : 7482-45F6-BC33-F8472

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Comite Amigos Jenniffer Gonzalez**

Mailing Address P.O. Box 367111

City State Zip Code  
San Juan PR 00936

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015

Transaction ID : 028A-4EE9-AC9F-5BA42

Amount of Each Disbursement this Period

1000.00

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

1850.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Cliff Hite**

Mailing Address 2417 Westmoor Rd.

City Findlay State OH Zip Code 45840

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : 65DF-49D3-B8B7-C0002

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Committee to Elect Cliff Rosenberger**

Mailing Address 7027 State Route 350 West

City Clarksville State OH Zip Code 45113

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : BD93-46F0-82ED-6FCC3

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**C. Emilia Sykes Campaign**

Mailing Address 109 N. Howard St.

City Akron State OH Zip Code 44308

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : AB77-4F6C-96C5-68D94

Amount of Each Disbursement this Period

350.00

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

2100.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Bill Coley**

Mailing Address 8265 Cherry Laurel Dr.

City State Zip Code  
Liberty Township OH 45044

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2015

Transaction ID : D7A5-4260-81F1-A6BC5

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**B. Friends of John Barnes**

Mailing Address 700 West St. Clair Ave.

City State Zip Code  
Cleveland OH 44113

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2015

Transaction ID : C3C5-422E-829E-E2031

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

**C. Friends of Nicholas Celebrezze**

Mailing Address 2344 Canal Rd.

City State Zip Code  
Cleveland OH 44133

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2015

Transaction ID : 42C7-478B-8949-86A8E

Amount of Each Disbursement this Period

350.00

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

1450.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Nickie Antonio**

Mailing Address 1305 Belle Ave.

City Lakewood State OH Zip Code 44107

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : 9970-4087-ACC7-4B5BE

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

**B. Friends of Ryan Smith**

Mailing Address 1661 Kemper Hollow Rd.

City Gallipolis State OH Zip Code 45631

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : 68BB-4208-BFA9-C9F21

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Friends of Shannon Jones**

Mailing Address 800 Valley View Point

City Springboro State OH Zip Code 45066

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : B2AC-4A25-BCE7-4B54D

Amount of Each Disbursement this Period

500.00

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

1850.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. House Republican Caucus Campaign Committee**

Mailing Address P.O. Box 1068

City Frankfort State KY Zip Code 40602

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015

Transaction ID : A5C6-4020-B95D-FBFAC

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. Kentucky Democratic Party (Non-Federal)**

Mailing Address 190 Democrat Dr.

City Frankfort State KY Zip Code 40601

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015

Transaction ID : 8653-4AD8-9622-CAADO

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Kentucky House Democratic Caucus Campaign Committee**

Mailing Address P.O. Box 4204

City Frankfort State KY Zip Code 40604

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 30 / 2015

Transaction ID : 564A-443C-BF5C-A3821

Amount of Each Disbursement this Period

2500.00

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

6000.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

### A. Kristina Daly Roegner for Ohio

Mailing Address 6519 Dunbarton Rd.

City Hudson State OH Zip Code 44236

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : 5E8D-4EA0-B326-EE7E4

Amount of Each Disbursement this Period

750.00
--------

Full Name (Last, First, Middle Initial)

### B. LaTourette for Ohio

Mailing Address P.O. Box 76

City Bainbridge State OH Zip Code 44022

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : 90DE-4580-A50A-DB57F

Amount of Each Disbursement this Period

350.00
--------

Full Name (Last, First, Middle Initial)

### C. Michele Lepore-Hagan for State Representative

Mailing Address 562 Madera Ave.

City Youngstown State OH Zip Code 44504

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : 63CF-4D5C-8AEC-E5F3F

Amount of Each Disbursement this Period

350.00
--------

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

1450.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. North Dakota Democratic Party - NPL**

Mailing Address 921 31st Ave. W

City West Fargo State ND Zip Code 58078

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : 3B12-4D97-AAC7-A0E91

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Oelslager for Ohio Committee**

Mailing Address 6706 Lake Cable Ave NW

City North Canton State OH Zip Code 44720

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : 3AA7-4422-8C0E-C3761

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Republican Party of Kentucky (Non-Federal)**

Mailing Address P.O. Box 1068

City Frankfort State KY Zip Code 40602

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : E131-4889-B722-D119F

Amount of Each Disbursement this Period

1000.00

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

2500.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Seitz for Senate Committee**

Mailing Address 4401 Abby Court

City Cincinnati State OH Zip Code 45248

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : B6E0-4E39-BEF6-73850

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

**B. Senate Republican Caucus Campaign Committee**

Mailing Address P.O. Box 1068

City Frankfort State KY Zip Code 40602

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : 5169-4C18-8A8E-5BBA8

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Sprague for State Representative**

Mailing Address 220 West Sandusky St.

City Findlay State OH Zip Code 45840

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : FD68-42DF-8465-C4D9A

Amount of Each Disbursement this Period

750.00

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

4000.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Steve Huffman for State Representative**

Mailing Address P.O. Box 739

City Troy State OH Zip Code 45373

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : D3CD-472D-BC8D-5F31E

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Terry Johnson for State Representative**

Mailing Address 1609 Offnere St.

City Portsmouth State OH Zip Code 45662

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : 7CDC-4331-BCB9-8115F

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Tim Ginter for State Representative**

Mailing Address 846 Homewood Ave.

City Salem State OH Zip Code 44460

Purpose of Disbursement  
Nonfederal Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

Transaction ID : 3BAF-460B-B89C-C7CD0

Amount of Each Disbursement this Period

500.00

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

1500.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Whitney Westerfield for Attorney General**

Mailing Address P.O. Box 340

City Hopkinsville State KY Zip Code 42241

Purpose of Disbursement  
Nonfederal 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 Y Y  
04 / 30 / 2015

Transaction ID : 7DA8-4C6B-8063-3C5F6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

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 Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

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 Y Y

Amount of Each Disbursement this Period

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

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

1000.00

26800.00