

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

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

FOR LINE NUMBER: PAGE 83 OF 799

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Sanofi US Services Inc. Employees' Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Calvert, Deanne, C, ,

Mailing Address 55 Corporate Drive

City  
Bridgewater

State  
NJ

Zip Code  
08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Sanofi US Services Inc.

Occupation (for Individual)  
Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 06 / 2019

Transaction ID : A2019-2972720

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Calvert, Deanne, C, ,

Mailing Address 55 Corporate Drive

City  
Bridgewater

State  
NJ

Zip Code  
08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Sanofi US Services Inc.

Occupation (for Individual)  
Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 20 / 2019

Transaction ID : A2019-3098086

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Capaldi, Michael, J, ,

Mailing Address 55 Corporate Drive

City  
Bridgewater

State  
NJ

Zip Code  
08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Sanofi US Services Inc.

Occupation (for Individual)  
Head US Oncology Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2692.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 05 / 2019

Transaction ID : A2019-1670288

Amount of Each Receipt this Period

192.30

☐ Memo Item

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

592.30

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