

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

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

FOR LINE NUMBER: PAGE 698 OF 814

(check only one)

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

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NAME OF COMMITTEE (In Full)

CELGENE CORPORATION POLITICAL ACTION COMMITTEE

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

A. Sylvia-Fournier, Lori, M, ,

Mailing Address 86 Morris Ave

City
Summit

State
NJ

Zip Code
07901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Celgene Corporation

Occupation (for Individual)
HEM/ONC 1

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
12 / 30 / 2019

Transaction ID : 2020010222455-280

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

B. Taylor, Karen, M, ,

Mailing Address 86 Morris Ave

City
Summit

State
NJ

Zip Code
07901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Celgene Corporation

Occupation (for Individual)
Dermatology Specialty Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 15 / 2019

Transaction ID : 201911622136-347

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

C. Taylor, Karen, M, ,

Mailing Address 86 Morris Ave

City
Summit

State
NJ

Zip Code
07901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Celgene Corporation

Occupation (for Individual)
Dermatology Specialty Rep

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 27 / 2019

Transaction ID : 201912022395-325

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

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

30.00