



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

Alan G. Levin, Treasurer
Pfizer Inc. PAC
235 East 42nd Street
New York, NY 10017

DEC 15 1999

Identification Number: C00016683

Reference: November Monthly Report (10/1/99-10/31/99)

Dear Mr. Levin:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule A of your report (pertinent portion(s) attached) discloses a receipt(s) of \$450.00, with an aggregate year-to-date total of \$2,100.00, from Pfizer PAC-State. Please clarify whether this transfer(s) is from an account maintained by your committee for non-federal activity. If so, be advised that such a transfer is prohibited by 11 CFR §102.5(a)(1)(i) and the full amount of the transfer(s) should be returned to the non-federal account. Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out. In addition, the transfer-out should be disclosed on Schedule B supporting Line 22 of your next report.

If this transaction represents an "internal transfer" of funds from one federal account to another, and the source(s) of such funds has been identified in previous reports of receipts and disbursements, please note that such transfers should not be itemized as doing so inflates total receipts and cash on hand. If this is the case, please amend your report accordingly.

Although the Commission may take further legal action regarding the acceptance of funds from a non-federal account, your prompt transfer-out of the impermissible funds or clarification of the transaction, will be taken into consideration.

-Schedule A of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2

U.S.C. §441a(f) and 11 CFR §110.1(d) preclude a committee and its affiliates from receiving contributions from another political committee or person in excess of \$5,000 per calendar year.

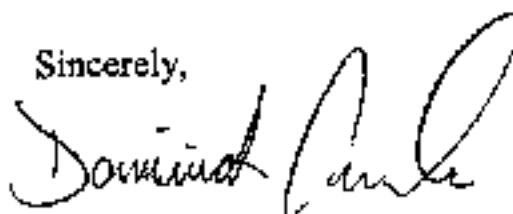
If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with the clarifying information. If the contribution(s) you received exceeded the limits, you must seek reattribution of the contribution pursuant to 11 CFR §110.1(k), transfer-out the amount in excess of \$5,000 to an account not used to influence federal elections or refund the excessive amount to the donor(s) in accordance with 11 CFR §103.3(b). In the best interest of your committee, all reattributions, transfers-out, and refunds should be made within sixty days of the treasurer's receipt of the contribution(s). In order to protect the donor's interests, the Commission recommends that you inform the contributor(s) in writing to provide the donor(s) with the option of granting written authorization for a reattribution or transfer-out to another account or receiving a refund.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of your check for the transfer-out or refund. In addition, any reattributions should be reported as memo entries on Schedule A of the report covering the period during which the authorization for the reattribution is received. Any transfers-out or refunds should be disclosed on Schedule B supporting Line 22 or 28 of the report during which the transaction was made.

Although the Commission may take further legal action regarding the acceptance of an excessive contribution(s), prompt action by your committee to seek reattribution, transfer-out or refund the excessive amount will be taken into consideration.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 694-1130.

Sincerely,



Dominick Ciaraldi
Reports Analyst
Reports Analysis Division

SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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

NAME OF COMMITTEE (in Full)

Pfizer PAC

Full Name, Mailing Address, and ZIP CodePfizer PAC - State
235 East 42nd St

New York

NY 10017

Name of Employer

Pfizer PAC - State

OccupationDate (month,
day, year)
10/31/1999Amount of Each
Receipt this Period
450.00

Receipt For:

☐ Primary☒ General☐ Other (specify):

Aggregate Year-to-Date > \$ 2100.00

SUBTOTALS of Receipts This Page (Optional)**TOTALS** This Period (last page this line number only)

450.00

SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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11A1**

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NAME OF COMMITTEE (in Full)
Pfizer PAC**Full Name, Mailing Address, and ZIP Code**MR CONSTANTINE L CLEMENTE
5 THE HIGH ROAD

BRONXVILLE NY 10708

Receipt For: ☐ Primary ☒ General☐ Other (specify):**Name of Employer**

Pfizer Inc.

Occupation

EVP CORPORATE AFFAIRS

Date (month,
day, year)

10/31/1999

Amount of Each
Receipt this Period
380.75

Aggregate Year-to-Date > \$ 5672.90

Full Name, Mailing Address, and ZIP CodeMR PHILIP J SANTORIELLA
BONNY DRIVE

SOMERS NY 10589-2507

Receipt For: ☐ Primary ☒ General☐ Other (specify):**Name of Employer**

Pfizer Inc.

Occupation

VP INTL FIELD OPNS - PPG

Date (month,
day, year)

10/31/1999

Amount of Each
Receipt this Period
106.54

Aggregate Year-to-Date > \$ 1553.36

Full Name, Mailing Address, and ZIP CodeMS NANCY L WOLK
1925 GREYSTONE ROAD NW

ATLANTA GA 30318

Receipt For: ☐ Primary ☒ General☐ Other (specify):**Name of Employer**

Pfizer Inc.

Occupation

REGIONAL MANAGER

Date (month,
day, year)

10/31/1999

Amount of Each
Receipt this Period
41.67

Aggregate Year-to-Date > \$ 363.38

Full Name, Mailing Address, and ZIP CodeMR RICHARD F REGGIO
2 MOUNTAIN CREST

CORNWALL-ON-HUDSON NY 12520-1819

Receipt For: ☐ Primary ☒ General☐ Other (specify):**Name of Employer**

Pfizer Inc.

Occupation

VP/GRP LEADER - SALES

Date (month,
day, year)

10/31/1999

Amount of Each
Receipt this Period
116.54

Aggregate Year-to-Date > \$ 1876.19

Full Name, Mailing Address, and ZIP CodeMR MICHAEL A MILANO
3504 BELLINGTON DR

ORLANDO FL 32835

Receipt For: ☐ Primary ☒ General☐ Other (specify):**Name of Employer**

Pfizer Inc.

Occupation

DISTRICT MANAGER

Date (month,
day, year)

10/31/1999

Amount of Each
Receipt this Period
41.67

Aggregate Year-to-Date > \$ 333.36

Full Name, Mailing Address, and ZIP CodeMR LOUIS E. BURKE
11827 SOUTH AUTUMN RIDGE DR

SANDY UT 84092

Receipt For: ☐ Primary ☒ General☐ Other (specify):**Name of Employer**

Pfizer Inc.

Occupation

DISTRICT MANAGER

Date (month,
day, year)

10/31/1999

Amount of Each
Receipt this Period
41.67

Aggregate Year-to-Date > \$ 333.36

Full Name, Mailing Address, and ZIP CodeMR EDWARD R HEINTZ
248 AMANDA PINES DRIVE

PARKER CO 80138

Receipt For: ☐ Primary ☒ General☐ Other (specify):**Name of Employer**

Pfizer Inc.

Occupation

STATE GOVT REL MGR

Date (month,
day, year)

10/31/1999

Amount of Each
Receipt this Period
41.67

Aggregate Year-to-Date > \$ 343.38

SUBTOTALS of Receipts This Page (Optional)**TOTALS This Period (last page this line number only)**

SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Pfizer PAC

Full Name, Mailing Address, and ZIP Code MR CONSTANTINE L CLEMENTE 5 THE HIGH ROAD BRONXVILLE NY 10708 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation EVP CORPORATE AFFAIRS Aggregate Year-to-Date > \$ 5412.15	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 260.75
Full Name, Mailing Address, and ZIP Code MR PHILIP J SANTORIELLA BONNY DRIVE SOMERS NY 10589-2507 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation VP INTL FIELD OPNS - PPG Aggregate Year-to-Date > \$ 1446.82	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 108.54
Full Name, Mailing Address, and ZIP Code MS NANCY L WOLK 1925 GREYSTONE ROAD NW ATLANTA GA 30318 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation REGIONAL MANAGER Aggregate Year-to-Date > \$ 321.69	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 41.87
Full Name, Mailing Address, and ZIP Code MR RICHARD F REGGIO 2 MOUNTAIN CREST CORNWALL-ON-HUDSON NY 12520-1819 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation VP/GRP LEADER - SALES Aggregate Year-to-Date > \$ 1759.65	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 116.54
Full Name, Mailing Address, and ZIP Code MR MICHAEL A MILANO 3504 BELLINGTON DR ORLANDO FL 32835 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation DISTRICT MANAGER Aggregate Year-to-Date > \$ 291.69	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 41.87
Full Name, Mailing Address, and ZIP Code MR LOUIS E. BURKE 11927 SOUTH AUTUMN RIDGE DR SANDY UT 84082 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation DISTRICT MANAGER Aggregate Year-to-Date > \$ 291.69	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 41.87
Full Name, Mailing Address, and ZIP Code MR EDWARD R HEINTZ 248 AMANDA PINES DRIVE PARKER CO 80138 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation STATE GOVT REL MGR Aggregate Year-to-Date > \$ 301.69	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 41.67
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (in Full)
Pfizer PAC

Full Name, Mailing Address, and ZIP Code MR FREDERICK W TELLING 22 BRIARWOOD COURT WOODCLIFF LAKE NJ 07675-7602	Name of Employer Pfizer Inc.	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation VP CORP STRAT PLNG & POLICY	Aggregate Year-to-Date > \$ 400.00	
Full Name, Mailing Address, and ZIP Code MR MATTHEW W LUSTIG 2385 BRIARLEIGH WAY DUNWOODY GA 30338	Name of Employer Pfizer Inc.	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 41.87
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation ASST TO REGIONAL MANAGER	Aggregate Year-to-Date > \$ 343.21	
Full Name, Mailing Address, and ZIP Code MR MICHAEL P TARNOK 7 BRENTWOOD COURT MT. KISCO NY 10549	Name of Employer Pfizer Inc.	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 40.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation VP FINANCE-PHARM	Aggregate Year-to-Date > \$ 320.00	
Full Name, Mailing Address, and ZIP Code DR MARK L HORN 124 OXFORD DRIVE TENAFLY NJ 07670-3116	Name of Employer Pfizer Inc.	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation DIR MED ALLIANCES - CIVIC AFF	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code MR NATALE RICCIARDI 8 COPPER BEACH ROAD GREENWICH CT 06830	Name of Employer Pfizer Inc.	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation VP/AREA TEAM LDR - US	Aggregate Year-to-Date > \$ 400.00	
Full Name, Mailing Address, and ZIP Code MR CONSTANTINE L CLEMENTE 5 THE HIGH ROAD BRONXVILLE NY 10708	Name of Employer Pfizer Inc.	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 280.75
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation EVP CORPORATE AFFAIRS	Aggregate Year-to-Date > \$ 5151.40	
Full Name, Mailing Address, and ZIP Code MR PHILIP J SANTORIELLA BONNY DRIVE SOMERS NY 10589-2507	Name of Employer Pfizer Inc.	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 106.54
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation VP INTL FIELD OPNS - PPG	Aggregate Year-to-Date > \$ 1340.28	
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

1. If the receipt is for a contribution, it must be itemized.
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SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page**8 / 48****FOR LINE NUMBER**
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NAME OF COMMITTEE (in Full)
Pfizer PAC

Full Name, Mailing Address, and ZIP Code MR FREDERICK W TELLING 22 BRIARWOOD COURT WOODCLIFF LAKE NJ 07675-7602	Name of Employer Pfizer Inc. Occupation VP CORP STRAT PLNG & POLICY	Date (month, day, year) 07/31/1999	Amount of Each Receipt this Period 50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 350.00		
Full Name, Mailing Address, and ZIP Code MR MATTHEW W LUSTIG 2395 BRIARLEIGH WAY DUNWOODY GA 30338	Name of Employer Pfizer Inc. Occupation ASST TO REGIONAL MANAGER	Date (month, day, year) 07/31/1999	Amount of Each Receipt this Period 41.87
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 301.34		
Full Name, Mailing Address, and ZIP Code MR MICHAEL P TARNOK 7 BRENTWOOD COURT MT. KISCO NY 10548	Name of Employer Pfizer Inc. Occupation VP FINANCE-PHARM	Date (month, day, year) 07/31/1999	Amount of Each Receipt this Period 40.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 280.00		
Full Name, Mailing Address, and ZIP Code MR NATALE RICCARDI 9 COPPER BEACH ROAD GREENWICH CT 06830	Name of Employer Pfizer Inc. Occupation VP/AREA TEAM LDR - US	Date (month, day, year) 07/31/1999	Amount of Each Receipt this Period 50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 350.00		
Full Name, Mailing Address, and ZIP Code MR CONSTANTINE L CLEMENTE 5 THE HIGH ROAD BRONXVILLE NY 10708	Name of Employer Pfizer Inc. Occupation EVP CORPORATE AFFAIRS	Date (month, day, year) 07/31/1999	Amount of Each Receipt this Period 280.75
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 4890.85		
Full Name, Mailing Address, and ZIP Code MR PHILIP J BANTORIELLA BONNY DRIVE SOMERS NY 10589-2507	Name of Employer Pfizer Inc. Occupation VP INTL FIELD OPNS - PPG	Date (month, day, year) 07/31/1999	Amount of Each Receipt this Period 108.54
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1233.74		
Full Name, Mailing Address, and ZIP Code MS NANCY L WOLK 1925 GREYSTONE ROAD NW ATLANTA GA 30318	Name of Employer Pfizer Inc. Occupation REGIONAL MANAGER	Date (month, day, year) 07/31/1999	Amount of Each Receipt this Period 41.67
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 238.35		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
11(a)(i)

Contributions From Individuals (itemized)

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 PAC

Full Name, Mailing Address and ZIP Code WILLIAM S CASH 452 BAYBERRY LANE MOUNTAINSIDE, NJ 07092-1401	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$94.70
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SR DIR CLIN DATA INFO & OPNS Aggregate Year-to-Date > \$ 935.41		
Full Name, Mailing Address and ZIP Code FRANCIS A CLARKSON 215 LAKE VISTA DRIVE CHAPIN, SC 29036-8471	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$41.67
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SR DISTRICT MANAGER Aggregate Year-to-Date > \$ 306.68		
Full Name, Mailing Address and ZIP Code CONSTANTINE L CLEMENTE 5 THE HIGH ROAD BRONXVILLE, NY 10708	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$260.75
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation EVP CORPORATE AFFAIRS Aggregate Year-to-Date > \$ 4,629.90		
Full Name, Mailing Address and ZIP Code CRAIG S COLES C/O PFIZER INC., 18500 VON KARMAN SUITE 600 IRVINE, CA 92612	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$41.68
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation REGIONAL MANAGER Aggregate Year-to-Date > \$ 206.72		
Full Name, Mailing Address and ZIP Code JENNIFER C COMEAUX 4021 BARONNE STREET NEW ORLEANS, LA 70115	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$41.60
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation REGIONAL ACCOUNT MANAGER Aggregate Year-to-Date > \$ 249.60		
Full Name, Mailing Address and ZIP Code PATRICK JOSEPH COONEY 29 LAKE SHORE DRIVE LAWRENCEVILLE, NJ 08648-4905	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation ASSISTANT TREASURER Aggregate Year-to-Date > \$ 300.00		
Full Name, Mailing Address and ZIP Code VINCENT JOSEPH CROCI 6115 WAKEFIELD DRIVE SYLVANIA, OH 43560-3653	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$41.67
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation INSTITUTIONAL HEALTHCARE R Aggregate Year-to-Date > \$ 227.70		
SUBTOTAL of Receipts This Page (optional)			\$ 572.07
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full) Pfizer PAC			
Full Name, Mailing Address and ZIP Code JOHN F BRONZO MOHAWK TRAIL P O BOX 129 GOLDENS BRIDGE, NY 10526-0129	Name of Employer Pfizer Inc. Occupation SENIOR CORPORATE COUNSEL Aggregate Year-to-Date \$ 473.30	Date (month, day, year) 5/31/99	Amount of Each Receipt this Period \$76.66
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code CATHERINE A BURGER 2608 MT AIRY AVENUE CINCINNATI, OH 45239-7244	Name of Employer Pfizer Inc. Occupation PROFESSIONAL HEALTHCARE R Aggregate Year-to-Date \$ 204.08	Date (month, day, year) 5/6/99	Amount of Each Receipt this Period \$50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code MARNEE C CAMP 100 JUNIPER MANSFIELD, TX 76063-1813	Name of Employer Pfizer Inc. Occupation SR INST HEALTHCARE REP Aggregate Year-to-Date \$ 217.33	Date (month, day, year) 5/31/99	Amount of Each Receipt this Period \$34.50
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code WILLIAM S CASH 452 BAYBERRY LANE MOUNTAINSIDE, NJ 07092-1401	Name of Employer Pfizer Inc. Occupation SR DIR CLIN DATA INFO & OPNS Aggregate Year-to-Date \$ 840.71	Date (month, day, year) 5/31/99	Amount of Each Receipt this Period \$94.70
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code CONSTANTINE L CLEMENTE 5 THE HIGH ROAD BRONXVILLE, NY 10708	Name of Employer Pfizer Inc. Occupation SVP CORPORATE AFFAIRS Aggregate Year-to-Date \$ 4,369.15	Date (month, day, year) 5/31/99	Amount of Each Receipt this Period \$260.75
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code JENNIFER C COMEAUX 4021 BARONNE STREET NEW ORLEANS, LA 70115	Name of Employer Pfizer Inc. Occupation REGIONAL ACCOUNT MANAGER Aggregate Year-to-Date \$ 108.00	Date (month, day, year) 5/31/99	Amount of Each Receipt this Period \$41.60
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
Full Name, Mailing Address and ZIP Code PATRICK JOSEPH COONEY 29 LAKE SHORE DRIVE LAWRENCEVILLE, NJ 08648-4905	Name of Employer Pfizer Inc. Occupation ASSISTANT TREASURER Aggregate Year-to-Date \$ 250.00	Date (month, day, year) 5/31/99	Amount of Each Receipt this Period \$50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
SUBTOTAL of Receipts This Page (optional)			\$ 608.21
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
11(n)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Pfizer PACFull Name, Mailing Address and ZIP Code
JOHN F BRONZO
MOHAWK TRAIL P O BOX 129
GOLDENS BRIDGE, NY 10526-0129Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

4/30/99

\$76.66

Occupation
SENIOR CORPORATE COUNSELReceipt For: ☐ Primary ☐ General

Aggregate Year-to-Date > \$ 396.64

☐ Other (specify):Full Name, Mailing Address and ZIP Code
MARK BROWN
3063 GLEN MARY WALK
DULUTH, GA 30097Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

4/21/99

\$500.00

Occupation
REGIONAL MANAGERReceipt For: ☐ Primary ☐ General

Aggregate Year-to-Date > \$ 540.00

☐ Other (specify):Full Name, Mailing Address and ZIP Code
WILLIAM S CASH
452 BAYBERRY LANE
MOUNTAINSIDE, NJ 07092-1401Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

4/30/99

\$94.70

Occupation
SR DIR CLIN DATA INFO & OPNSReceipt For: ☐ Primary ☐ General

Aggregate Year-to-Date > \$ 746.01

☐ Other (specify):Full Name, Mailing Address and ZIP Code
CONSTANTINE L CLEMENTE
5 THE HIGH ROAD
BRONXVILLE, NY 10708Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

4/30/99

\$260.75

Occupation
SVP CORPORATE AFFAIRSReceipt For: ☐ Primary ☐ General

Aggregate Year-to-Date > \$ 4,108.40

☐ Other (specify):Full Name, Mailing Address and ZIP Code
DANIEL P CRONIN
24 WOODLAWN AVENUE
NEW ROCHELLE, NY 10804-4619Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

4/30/99

\$75.00

Occupation
SR ASST GEN COUNSELReceipt For: ☐ Primary ☐ General

Aggregate Year-to-Date > \$ 300.00

☐ Other (specify):Full Name, Mailing Address and ZIP Code
JOHN A CURRIE
1793 N HARTWELL MANOR LANE
COLLIERSVILLE, TN 38017-0836Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

4/30/99

\$78.62

Occupation
DISTRICT MANAGERReceipt For: ☐ Primary ☐ General

Aggregate Year-to-Date > \$ 309.21

☐ Other (specify):Full Name, Mailing Address and ZIP Code
PAUL DEL BAILO
2500 JOHNSON AVE
RIVERDALE, NY 10463-4925Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

4/30/99

\$138.79

Occupation
VP-CORP TECH & SVCSReceipt For: ☐ Primary ☐ General

Aggregate Year-to-Date > \$ 1,513.03

☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

\$ 1,234.52

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 2 OF 8
FOR LINE NUMBER
11(a)(i)

Contributions From Individuals (itemized)

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 PAC					
Full Name, Mailing Address and ZIP Code WILLIAM S CASH 452 BAYBERRY LANE MOUNTAINSIDE, NJ 07092-1401	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$94.70		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SR DIR CLIN DATA INFO & OPNS Aggregate Year-to-Date > \$ 651.31				
Full Name, Mailing Address and ZIP Code CONSTANTINE L CLEMENTE 5 THE HIGH ROAD BRONXVILLE, NY 10708	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$3,346.75		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SVP CORPORATE AFFAIRS Aggregate Year-to-Date > \$ 3,847.65				
Full Name, Mailing Address and ZIP Code KEITH J CONNELL 9190 WESTON DRIVE BRENTWOOD, TN 37027	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$500.00		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation DISTRICT MANAGER Aggregate Year-to-Date > \$ 510.00				
Full Name, Mailing Address and ZIP Code DANIEL P CRONIN 24 WOODLAWN AVENUE NEW ROCHELLE, NY 10804-4619	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$75.00		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SR ASST GEN COUNSEL Aggregate Year-to-Date > \$ 225.00				
Full Name, Mailing Address and ZIP Code JOHN A CURRIE 1793 N HARTWELL MANOR LANE COLLIERVILLE, TN 38017-0836	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$78.62		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation DISTRICT MANAGER Aggregate Year-to-Date > \$ 230.59				
Full Name, Mailing Address and ZIP Code PAUL DEL BAILO 2500 JOHNSON AVE RIVERDALE, NY 10463-4925	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$138.79		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation VP-CORP TECH & SVCS Aggregate Year-to-Date > \$ 1,374.24				
Full Name, Mailing Address and ZIP Code BERYL WILLIAM DOMINY 189 SENECA DRIVE NOANK, CT 06340-5651	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$57.94		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation RESEARCH ADVISOR - CHEMIST Aggregate Year-to-Date > \$ 208.82				
SUBTOTAL of Receipts This Page (optional)			\$ 4,291.80		
TOTAL This Period (last page this line number only)					

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 2 OF 4
FOR LINE NUMBER 11(a)(1)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)

Pfizer PAC

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CONSTANTINE L CLEMENTE 5 THE HIGH ROAD BRONXVILLE, NY 10708	Pfizer Inc. Occupation SVP CORPORATE AFFAIRS	2/28/99	\$250.45
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 500.90		
PAUL DEL BALSO 2500 JOHNSON AVE RIVERDALE, NY 10463-4925	Pfizer Inc. Occupation VP-CORP TECH & SVCS	2/28/99	\$1,106.79
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 1,235.45		
BO B JARNETEDT 250 STANDWICH RD GREENWICH, CT 06830	Pfizer Inc. Occupation VP MKTG OPNS	2/28/99	\$497.16
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 586.32		
GARY N JORTNER 18 LONGLEDGE DRIVE RYE BROOK, NY 10573-1945	Pfizer Inc. Occupation SVP PRDT DEV - PPG	2/28/99	\$148.12
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 296.24		
KAREN L KATEN 40 SUTTON PLACE, APT. 4H NEW YORK, NY 10021-2369	Pfizer Inc. Occupation EVP-PPG	2/28/99	\$245.58
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 491.16		
VICKI LAMB-MCNAMARA 4621 FRANKLIN ROAD NASHVILLE, TN 37220-1149	Pfizer Inc. Occupation DISTRICT MANAGER	2/23/99 2/28/99	\$500.00 \$5.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 510.00		
ALAN G LEVIN 23 SKYLARK DRIVE SPRING VALLEY, NY 10977	Pfizer Inc. Occupation VP & TREASURER	2/28/99	\$136.16
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > \$ 272.32		
SUBTOTAL of Receipts This Page (optional)			\$ 2,889.26
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)

Pfizer PAC

Full Name, Mailing Address and ZIP Code
CONSTANTINE L CLEMENTE
5 THE HIGH ROAD
BRONXVILLE, NY 10708Name of Employer
Pfizer Inc.Date (month,
day, year)
1/31/99Amount of Each
Receipt this Period
\$250.45Occupation
SVP CORPORATE AFFAIRSReceipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$ 250.45

Full Name, Mailing Address and ZIP Code
ROBERT J. ELLENDER
4276 HOLLY HILL COURT
LAKE CHARLES, LA 70605-4261Name of Employer
Pfizer Inc.Date (month,
day, year)
1/18/99Amount of Each
Receipt this Period
\$500.00Occupation
PROFESSIONAL HEALTHCARE RReceipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$ 500.00

Full Name, Mailing Address and ZIP Code
KAREN L KATEN
40 SUTTON PLACE, APT. 4H
NEW YORK, NY 10022-2369Name of Employer
Pfizer Inc.Date (month,
day, year)
1/31/99Amount of Each
Receipt this Period
\$245.58Occupation
EVP-PPGReceipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$ 245.58

Full Name, Mailing Address and ZIP Code
STEWART W MOSEBROOK
155 REGENTS PARK
WESTPORT, CT 06880-5530Name of Employer
Pfizer Inc.Date (month,
day, year)
1/21/99
1/31/99Amount of Each
Receipt this Period
\$500.00
\$25.00Occupation
VP/GRP LEADER - SALESReceipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$ 525.00

Full Name, Mailing Address and ZIP Code
PETER C RICHARDSON
29 HARWICH ROAD
MORRISTOWN, NJ 07960-2639Name of Employer
Pfizer Inc.Date (month,
day, year)
1/26/99Amount of Each
Receipt this Period
\$500.00Occupation
SR ASST GC&ASST SECY&GEN P/Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$ 500.00

Full Name, Mailing Address and ZIP Code
DAVID L SHEDLARZ
265 E. 66TH STREET, APT. 29C
NEW YORK, NY 10021Name of Employer
Pfizer Inc.Date (month,
day, year)
1/31/99Amount of Each
Receipt this Period
\$248.41Occupation
SVP-FINANCE & CFOReceipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date \$ 248.41

SUBTOTAL of Receipts This Page (optional)

\$ 2,269.44

TOTAL This Period (last page this line number only)

\$ 2,269.44

SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (In Full)
Pfizer PAC

Full Name, Mailing Address, and ZIP Code MR DAVID L SHEDLARZ 265 E. 85TH STREET APT. 28C NEW YORK NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation EVP & CFO Aggregate Year-to-Date > \$ 5398.32	Date (month, day, year) 10/31/1998	Amount of Each Receipt this Period 280.75
Full Name, Mailing Address, and ZIP Code MR JACK K PASINI 39 W WILDWOOD ROAD SADDLE RIVER NJ 07458 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation VP, GRP LDR-WW ANTHINFECT GRP Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/31/1998	Amount of Each Receipt this Period 100.00
Full Name, Mailing Address, and ZIP Code MS CATHERINE P BENNETT 1323 KIRBY ROAD MC LEAN VA 22101-2410 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation VP FED TAX & TRADE LEGISLATION Aggregate Year-to-Date > \$ 1147.08	Date (month, day, year) 10/31/1998	Amount of Each Receipt this Period 83.62
Full Name, Mailing Address, and ZIP Code MR CHRISTOPHER P DOWD 21 SKYVIEW DR SPARTA NJ 07871 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation REGIONAL MANAGER Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/31/1998	Amount of Each Receipt this Period 25.00
Full Name, Mailing Address, and ZIP Code MR THOMAS A. SALAMONE 213 HIGHLAND AVENUE SLEEPY HOLLOW NY 10581-1437 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation DISTRICT MANAGER Aggregate Year-to-Date > \$ 333.36	Date (month, day, year) 10/31/1998	Amount of Each Receipt this Period 41.67
Full Name, Mailing Address, and ZIP Code MS LOUESA M LARDIERI 15 GARRETSON DRIVE FRANKLIN PARK NJ 08823-1423 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation NATIONAL DIRECTOR, MSL Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/31/1998	Amount of Each Receipt this Period 25.00
Full Name, Mailing Address, and ZIP Code MS ANDREA GOMEZ 171 EAST 84TH STREET APT 21-E NEW YORK NY 10028 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation MARKETING MGR Aggregate Year-to-Date > \$ 336.66	Date (month, day, year) 10/31/1998	Amount of Each Receipt this Period 41.67

SUBTOTALS of Receipts This Page (Optional)**TOTALS** This Period (last page this line number only)

SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
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11A1**

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**NAME OF COMMITTEE (in Full)
Pfizer PAC**

Full Name, Mailing Address, and ZIP Code MR CHARLES M DOMBECK 30 OAKWOOD RD ALLENDALE NJ 07401-2118	Name of Employer Pfizer Inc.	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 25.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation VP CORP EMPLOYEE RESOURCES	Aggregate Year-to-Date > \$ 225.00	
Full Name, Mailing Address, and ZIP Code MR SAMUEL E BRANDES 23867 VIA MADRID MURRIETA CA 92582	Name of Employer Pfizer Inc.	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 41.68
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation DISTRICT MANAGER	Aggregate Year-to-Date > \$ 250.08	
Full Name, Mailing Address, and ZIP Code MR THOMAS C KOENIG 448 RIDGE CIRCLE BRANDON MS 39047	Name of Employer Pfizer Inc.	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 41.67
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation DISTRICT MANAGER	Aggregate Year-to-Date > \$ 311.69	
Full Name, Mailing Address, and ZIP Code MR ROBERT F SHEYKA 403 WHITON ST JERSEY CITY NJ 07304-4128	Name of Employer Pfizer Inc.	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 67.81
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation SR PATENT ATTORNEY	Aggregate Year-to-Date > \$ 886.19	
Full Name, Mailing Address, and ZIP Code MR WILLIAM C WINGARDNER 16270 OLD WATERFORD RD PAEONIAN SPRINGS VA 20129-3748	Name of Employer Pfizer Inc.	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 42.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation REGIONAL MANAGER	Aggregate Year-to-Date > \$ 282.00	
Full Name, Mailing Address, and ZIP Code MR PETER TSIKENTZOGLOU 276 FOURTH STREET JERSEY CITY NJ 07302-2314	Name of Employer Pfizer Inc.	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 26.16
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation ASSOC PROD DEV CHEMIST	Aggregate Year-to-Date > \$ 242.44	
Full Name, Mailing Address, and ZIP Code MR DAVID L SHEDLARZ 265 E. 88TH STREET APT. 29C NEW YORK NY 10021	Name of Employer Pfizer Inc.	Date (month, day, year) 09/30/1999	Amount of Each Receipt this Period 250.75
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation EVP & CFO	Aggregate Year-to-Date > \$ 3137.57	

SUBTOTALS of Receipts This Page (Optional)**TOTALS** This Period (last page this line number only)

SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
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FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Pfizer PAC

Full Name, Mailing Address, and ZIP Code MR PETER TSIKENTZOGLOU 275 FOURTH STREET JERSEY CITY NJ 07302-2314 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation ASSOC PROD DEV CHEMIST Aggregate Year-to-Date > \$ 215.28	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 26.15
Full Name, Mailing Address, and ZIP Code MR DAVID L SHEDLARZ 285 E. 66TH STREET APT. 29C NEW YORK NY 10021 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation EVP & CFO Aggregate Year-to-Date > \$ 4876.82	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 280.75
Full Name, Mailing Address, and ZIP Code MR JACK K PASINI 39 W WILDWOOD ROAD SADDLE RIVER NJ 07458 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation VP,GRP LDR-WWW ANT-INFECT GRP Aggregate Year-to-Date > \$ 800.00	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 100.00
Full Name, Mailing Address, and ZIP Code MS CATHERINE P BENNETT 1323 KIRBY ROAD MC LEAN VA 22101-2410 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation VP FED TAX & TRADE LEGISLATION Aggregate Year-to-Date > \$ 879.84	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 83.62
Full Name, Mailing Address, and ZIP Code MR THOMAS A. SALAMONE 213 HIGHLAND AVENUE SLEEPY HOLLOW NY 10591-1437 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation DISTRICT MANAGER Aggregate Year-to-Date > \$ 250.02	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 41.67
Full Name, Mailing Address, and ZIP Code MS ANDREA GOMEZ 171 EAST 84TH STREET APT 21-E NEW YORK NY 10028 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation MARKETING MGR Aggregate Year-to-Date > \$ 253.35	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 41.67
Full Name, Mailing Address, and ZIP Code MR DIRK K BARRETT JR 173 OLD POST ROAD NORTH CROTON-ON-HUDSON NY 10520 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Pfizer Inc. Occupation SENIOR CORPORATE COUNSEL Aggregate Year-to-Date > \$ 240.00	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period 30.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page**11 / 45**FOR LINE NUMBER
11A1

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NAME OF COMMITTEE (in Full)
Pfizer PAC**Full Name, Mailing Address, and ZIP Code**MR DAVID L SHEDLARZ
285 E. 66TH STREET
APT. 29C
NEW YORK NY 10021**Name of Employer**

Pfizer Inc.

**Date (month,
day, year)**

07/31/1999

**Amount of Each
Receipt this Period**

260.75

Occupation

EVP & CFO

Aggregate Year-to-Date > \$

4816.07

Receipt For:☐ Primary☒ General☐ Other (specify):**Full Name, Mailing Address, and ZIP Code**MR JACK K PASINI
39 W WILDWOOD ROAD

SADDLE RIVER NJ 07458

Name of Employer

Pfizer Inc.

**Date (month,
day, year)**

07/31/1999

**Amount of Each
Receipt this Period**

100.00

Occupation

VP, GRP LDR-WW ANTI-INFECT GRP

Aggregate Year-to-Date > \$

700.00

Receipt For:☐ Primary☒ General☐ Other (specify):**Full Name, Mailing Address, and ZIP Code**MS CATHERINE P BENNETT
1323 KIRBY ROAD

MC LEAN VA 22101-2410

Name of Employer

Pfizer Inc.

**Date (month,
day, year)**

07/31/1999

**Amount of Each
Receipt this Period**

63.62

Occupation

VP FED TAX & TRADE LEGISLATION

Aggregate Year-to-Date > \$

896.22

Receipt For:☐ Primary☒ General☐ Other (specify):**Full Name, Mailing Address, and ZIP Code**MR THOMAS A SALAMONE
213 HIGHLAND AVENUE

SLEEPY HOLLOW NY 10591-1437

Name of Employer

Pfizer Inc.

**Date (month,
day, year)**

07/31/1999

**Amount of Each
Receipt this Period**

41.87

Occupation

DISTRICT MANAGER

Aggregate Year-to-Date > \$

208.35

Receipt For:☐ Primary☒ General☐ Other (specify):**Full Name, Mailing Address, and ZIP Code**MS ANDREA GOMEZ
171 EAST 84TH STREET
APT 21-E
NEW YORK NY 10028**Name of Employer**

Pfizer Inc.

**Date (month,
day, year)**

07/31/1999

**Amount of Each
Receipt this Period**

41.67

Occupation

MARKETING MGR

Aggregate Year-to-Date > \$

211.68

Receipt For:☐ Primary☒ General☐ Other (specify):**Full Name, Mailing Address, and ZIP Code**MR DIRK K BARRETT JR
173 OLD POST ROAD NORTH

CROTON-ON-HUDSON NY 10520

Name of Employer

Pfizer Inc.

**Date (month,
day, year)**

07/31/1999

**Amount of Each
Receipt this Period**

30.00

Occupation

SENIOR CORPORATE COUNSEL

Aggregate Year-to-Date > \$

210.00

Receipt For:☐ Primary☒ General☐ Other (specify):**Full Name, Mailing Address, and ZIP Code**DR DOUGLAS O FISHER
59 OLD POST RD RR #5

WAKEFIELD RI 02879

Name of Employer

Pfizer Inc.

**Date (month,
day, year)**

07/31/1999

**Amount of Each
Receipt this Period**

45.70

Occupation

SR ASSOC DIR CLIN RES

Aggregate Year-to-Date > \$

358.40

Receipt For:☐ Primary☒ General☐ Other (specify):**SUBTOTALS** of Receipts This Page (Optional)**TOTALS** This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 21 OF 26
FOR LINE NUMBER
11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Pfizer PAC

Full Name, Mailing Address and ZIP Code MONICA L. SEARCY 17958 PECAN SHADOWS DR. BATON ROUGE, LA 70810	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$50.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation DISTRICT MANAGER Aggregate Year-to-Date \$ 250.00		
Full Name, Mailing Address and ZIP Code ALLAN SHARFSTEIN 89 SUMMITWOOD LANE MT. KISCO, NY 10549	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$100.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation VP-AUDIT Aggregate Year-to-Date \$ 420.00		
Full Name, Mailing Address and ZIP Code DAVID L. SHEDLARZ 265 E. 66TH STREET, APT. 29C NEW YORK, NY 10021	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$260.75
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation EVP-FINANCE & CFO Aggregate Year-to-Date \$ 4,355.32		
Full Name, Mailing Address and ZIP Code ROBERT F. SHEYKA 403 WHITON ST JERSEY CITY, NJ 07304-4128	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$67.91
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SR PATENT ATTORNEY Aggregate Year-to-Date \$ 462.46		
Full Name, Mailing Address and ZIP Code JONT SHOULDERS 8011 WALDEN RD BATON ROUGE, LA 70808	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$42.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SR INST HEALTHCARE REP Aggregate Year-to-Date \$ 252.00		
Full Name, Mailing Address and ZIP Code ROGER SIROTA 15704 HILL HOUSE RD CHESTERFIELD, MO 63017-7213	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$50.29
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation REGIONAL ACCOUNT MANAGER Aggregate Year-to-Date \$ 362.51		
Full Name, Mailing Address and ZIP Code KATHRYN A. SISK 7 E 66TH ST KANSAS CITY, MO 64113-7245	Name of Employer Pfizer Inc.	Date (month, day, year) 6/30/99	Amount of Each Receipt this Period \$30.83
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation PROFESSIONAL HEALTHCARE R Aggregate Year-to-Date \$ 250.43		
SUBTOTAL of Receipts This Page (optional)			\$ 601.78
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 14 OF 18
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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 PAC

Full Name, Mailing Address and ZIP Code
DAVID L SHEDLARZ
265 E. 66TH STREET, APT. 29C
NEW YORK, NY 10021Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

5/31/99

\$260.75

Receipt For: ☐ Primary ☐ General
☐ Other (specify):Occupation
SVP-FINANCE & CFO

Aggregate Year-to-Date \$ 4,094.57

Full Name, Mailing Address and ZIP Code
ROBERT F SNEYKA
403 WHITON ST
JERSEY CITY, NJ 07304-4128Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

5/31/99

\$67.91

Receipt For: ☐ Primary ☐ General
☐ Other (specify):Occupation
SR PATENT ATTORNEY

Aggregate Year-to-Date \$ 394.55

Full Name, Mailing Address and ZIP Code
JON T SHOULDERS
8011 WALDEN RD
BATON ROUGE, LA 70808Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

5/31/99

\$42.00

Receipt For: ☐ Primary ☐ General
☐ Other (specify):Occupation
SR INST HEALTHCARE REP

Aggregate Year-to-Date \$ 210.00

Full Name, Mailing Address and ZIP Code
ROGER SIROTA
15704 HILL HOUSE RD
CHESTERFIELD, MO 63017-7213Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

5/31/99

\$50.29

Receipt For: ☐ Primary ☐ General
☐ Other (specify):Occupation
REGIONAL ACCOUNT MANAGER

Aggregate Year-to-Date \$ 312.22

Full Name, Mailing Address and ZIP Code
KATHRYN A SISK
7 E 66TH ST
KANSAS CITY, MO 64113-7245Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

5/31/99

\$30.83

Receipt For: ☐ Primary ☐ General
☐ Other (specify):Occupation
PROFESSIONAL HEALTHCARE R

Aggregate Year-to-Date \$ 219.60

Full Name, Mailing Address and ZIP Code
JAMES B SKELLEY
2036 HIGHLAND DR.
HOOVER, AL 35244Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

5/31/99

\$47.16

Receipt For: ☐ Primary ☐ General
☐ Other (specify):Occupation
SR PROFESSIONAL HLTHCARE C

Aggregate Year-to-Date \$ 322.10

Full Name, Mailing Address and ZIP Code
JASON B. SMITH
204 CHANTILLY DR
HOUMA, LA 70360Name of Employer
Pfizer Inc.Date (month,
day, year)Amount of Each
Receipt this Period

5/31/99

\$41.67

Receipt For: ☐ Primary ☐ General
☐ Other (specify):Occupation
HEALTHCARE REPRESENTATIVE

Aggregate Year-to-Date \$ 208.35

SUBTOTAL of Receipts This Page (optional)

\$ 540.61

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 8 OF 10
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (itemized)

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NAME OF COMMITTEE (in Full) Pfizer PAC			
Full Name, Mailing Address and ZIP Code DAVID L SHEDLARZ 265 E. 66TH STREET, APT. 29C NEW YORK, NY 10021	Name of Employer Pfizer Inc.	Date (month, day, year) 4/30/99	Amount of Each Receipt this Period \$260.75
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SVP-FINANCE & CFO Aggregate Year-to-Date > \$ 3,833.82		
Full Name, Mailing Address and ZIP Code ROBERT F SHEYKA 403 WHITON ST JERSEY CITY, NJ 07304-4128	Name of Employer Pfizer Inc.	Date (month, day, year) 4/30/99	Amount of Each Receipt this Period \$67.91
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SR PATENT ATTORNEY Aggregate Year-to-Date > \$ 326.64		
Full Name, Mailing Address and ZIP Code ROGER SIROTA 15704 HILL HOUSE RD CHESTERFIELD, MO 63017-7213	Name of Employer Pfizer Inc.	Date (month, day, year) 4/30/99	Amount of Each Receipt this Period \$50.29
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation REGIONAL ACCOUNT MANAGER Aggregate Year-to-Date > \$ 261.93		
Full Name, Mailing Address and ZIP Code JAMES E SKELLEY 2036 HIGHLAND DR. HOOVER, AL 35244	Name of Employer Pfizer Inc.	Date (month, day, year) 4/30/99	Amount of Each Receipt this Period \$47.16
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SR PROFESSIONAL HLTHCARE C Aggregate Year-to-Date > \$ 274.94		
Full Name, Mailing Address and ZIP Code LARRY B SMITH 6 RICHMOND HILL DRIVE SPARTA, NJ 07871-4003	Name of Employer Pfizer Inc.	Date (month, day, year) 4/30/99	Amount of Each Receipt this Period \$70.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation REGIONAL MANAGER Aggregate Year-to-Date > \$ 414.62		
Full Name, Mailing Address and ZIP Code SUSAN A STANDER 8302 N MOCKINGBIRD LANE PARADISE VALLEY, AZ 85253-2507	Name of Employer Pfizer Inc.	Date (month, day, year) 4/30/99	Amount of Each Receipt this Period \$39.37
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SR PROFESSIONAL HLTHCARE C Aggregate Year-to-Date > \$ 235.77		
Full Name, Mailing Address and ZIP Code JOHN W STRANGE 400 PERIMETER CENTER TERRACE, SUITE 700 ATLANTA, GA 30346-1227	Name of Employer Pfizer Inc.	Date (month, day, year) 4/30/99	Amount of Each Receipt this Period \$41.67
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation REGIONAL MANAGER Aggregate Year-to-Date > \$ 233.34		
SUBTOTAL of Receipts This Page (optional)			\$ 577.15
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 6 OF 8
FOR LINE NUMBER 11(a)(i)

Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full) Pfizer PAC			
Full Name, Mailing Address and ZIP Code PHILIP J SANTORIELLA BONNY DRIVE SOMERS, NY 10589-2507	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$106.54
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation VP INTL FIELD OPNS - PPG Aggregate Year-to-Date > \$ 807.58		
Full Name, Mailing Address and ZIP Code HOLGER E SCHUSTER 928 MORGAN BLUFF ROAD PEARL RIVER, LA 70452-3831	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$50.20
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SR DISTRICT MANAGER Aggregate Year-to-Date > \$ 219.18		
Full Name, Mailing Address and ZIP Code AMY SEWELL RICKMAN 3604 COTSWOLD CT COLLEYVILLE, TX 76034	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation DISTRICT MANAGER Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address and ZIP Code DAVID L SHEDLARZ 265 E. 66TH STREET, APT. 29C NEW YORK, NY 10021	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$3,076.25
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SVP-FINANCE & CFO Aggregate Year-to-Date > \$ 3,573.07		
Full Name, Mailing Address and ZIP Code ROBERT F SHEYKA 403 WHITON ST JERSEY CITY, NJ 07304-4128	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$67.91
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SR PATENT ATTORNEY Aggregate Year-to-Date > \$ 258.73		
Full Name, Mailing Address and ZIP Code ROGER SIROTA 15704 HILL HOUSE RD CHESTERFIELD, MO 63017-7213	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$50.29
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation REGIONAL ACCOUNT MANAGER Aggregate Year-to-Date > \$ 211.64		
Full Name, Mailing Address and ZIP Code JAMES E SKELLEY 2036 HIGHLAND DR HOOVER, AL 35244	Name of Employer Pfizer Inc.	Date (month, day, year) 3/31/99	Amount of Each Receipt this Period \$47.16
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SR PROFESSIONAL HLTHCARE C Aggregate Year-to-Date > \$ 227.78		
SUBTOTAL of Receipts This Page (optional)			\$ 3,898.35
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Pfizer PAC

Full Name, Mailing Address and ZIP Code RICHARD F REGGIO 2 MOUNTAIN CREST CORNWALL-ON-HUDSON, NY 12520-1819	Name of Employer Pfizer Inc.	Date (month, day, year) 2/28/99	Amount of Each Receipt this Period \$835.54
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation VP/GRP LEADER - SALES Aggregate Year-to-Date > \$ 943.87		
Full Name, Mailing Address and ZIP Code J M RICHARDSON 64 E 80TH STREET APT 2R NEW YORK, NY 10021-0243	Name of Employer Pfizer Inc.	Date (month, day, year) 2/28/99	Amount of Each Receipt this Period \$653.37
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation VP ENVIR SAFE&HTH ASTGC&A Aggregate Year-to-Date > \$ 745.45		
Full Name, Mailing Address and ZIP Code ROGER M SACHS 7 APACHE TRAIL WESTPORT, CT 06880-3637	Name of Employer Pfizer Inc.	Date (month, day, year) 2/28/99	Amount of Each Receipt this Period \$120.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SVP MEDICAL AFFAIRS Aggregate Year-to-Date > \$ 240.00		
Full Name, Mailing Address and ZIP Code PHILIP J SANTORIELLA BONNY DRIVE SOMERS, NY 10589-2507	Name of Employer Pfizer Inc.	Date (month, day, year) 2/28/99	Amount of Each Receipt this Period \$598.54
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation VP INTL FIELD OPNS - PTG Aggregate Year-to-Date > \$ 701.64		
Full Name, Mailing Address and ZIP Code DAVID L SHEDLARZ 265 E. 66TH STREET, APT. 29C NEW YORK, NY 10021	Name of Employer Pfizer Inc.	Date (month, day, year) 2/28/99	Amount of Each Receipt this Period \$248.41
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SVP-FINANCE & CFO Aggregate Year-to-Date > \$ 496.82		
Full Name, Mailing Address and ZIP Code LARRY B SMITH 6 RICHMOND HILL DRIVE SPARTA, NJ 07871-4003	Name of Employer Pfizer Inc.	Date (month, day, year) 2/28/99	Amount of Each Receipt this Period \$204.62
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation REGIONAL MANAGER Aggregate Year-to-Date > \$ 274.62		
Full Name, Mailing Address and ZIP Code JAMES D WITHERSPOON 6432 RIVER TIDE DRIVE MEMPHIS, TN 38120-2638	Name of Employer Pfizer Inc.	Date (month, day, year) 2/28/99	Amount of Each Receipt this Period \$238.58
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation REGIONAL LOGISTICS DIRECTO Aggregate Year-to-Date > \$ 299.62		
SUBTOTAL of Receipts This Page (optional)			\$ 2,999.06
TOTAL This Period (last page this line number only)			\$ 9,388.12

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 1
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Contributions From Individuals (Itemized)

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NAME OF COMMITTEE (in Full)
Pfizer PAC

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CONSTANTINE L. CLEMENTE 5 THE HIGH ROAD BRONXVILLE, NY 10708	Pfizer Inc.	1/31/99	\$250.45
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SVP CORPORATE AFFAIRS Aggregate Year-to-Date \$ 250.45		
ROBERT J. ELLENDER 4276 HOLLY HILL COURT LAKE CHARLES, LA 70605-4261	Pfizer Inc.	1/18/99	\$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation PROFESSIONAL HEALTHCARE R Aggregate Year-to-Date \$ 500.00		
KAREN L KATEN 40 SUTTON PLACE, APT. 4H NEW YORK, NY 10022-2369	Pfizer Inc.	1/31/99	\$245.58
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation FVP-PPG Aggregate Year-to-Date \$ 245.58		
STEWART W MOSEBROOK 155 REGENTS PARK WESTPORT, CT 06880-3530	Pfizer Inc.	1/21/99 1/31/99	\$500.00 \$25.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation VP/GRP LEADER - SALES Aggregate Year-to-Date \$ 525.00		
PETER C RICHARDSON 29 HARWICH ROAD MORRISTOWN, NJ 07960-2639	Pfizer Inc.	1/26/99	\$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SR ASST GC & ASST SECY & GEN P Aggregate Year-to-Date \$ 500.00		
DAVID L SHEDLARZ 265 E. 66TH STREET, APT. 29C NEW YORK, NY 10021	Pfizer Inc.	1/31/99	\$248.41
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation SVP-FINANCE & CFO Aggregate Year-to-Date \$ 248.41		

SUBTOTAL of Receipts This Page (optional)

\$ 2,269.44

TOTAL This Period (last page this line number only)

\$ 2,269.44

