

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 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

Gilead Sciences Inc Healthcare Policy PAC

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

A. Briggs, Laura, , ,

Mailing Address 560 Olivina Ave

City
Livermore

State
CA

Zip Code
94551-2649

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gilead Sciences, Inc.

Occupation (for Individual)
Director, Commercial L&D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

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

Transaction ID : 2019120613335-24

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

B. Briggs, Laura, , ,

Mailing Address 560 Olivina Ave

City
Livermore

State
CA

Zip Code
94551-2649

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gilead Sciences, Inc.

Occupation (for Individual)
Director, Commercial L&D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

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

Transaction ID : 201912201295-24

Amount of Each Receipt this Period

9.00

☐ Memo Item

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

C. Brooks, Douglas, M, ,

Mailing Address 1724 17th St NW
Apt 22

City
Washington

State
DC

Zip Code
20009-2427

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gilead Sciences, Inc.

Occupation (for Individual)
Exec Director, Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 16 / 2019

Transaction ID : B2EDC35F-B331-4843-

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

2518.00