

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

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

FOR LINE NUMBER: PAGE 138 OF 181

(check only one)

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

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NAME OF COMMITTEE (In Full)

Amgen Inc. Political Action Committee

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

A. CASTANEDA, Beth, H, Ms.,

Mailing Address One Amgen Center Drive

City

Thousand Oaks

State

CA

Zip Code

91320-1730

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Amgen Inc.

Occupation (for Individual)

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

572.54

Date of Receipt

07 / 31 / 2019

Transaction ID : PR774472366750

Amount of Each Receipt this Period

76.92

☐ Memo Item

P/R Deduction (\$38.46 Bi-Weekly)

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

B. SHEN, Glenna, , Ms.,

Mailing Address One Amgen Center Drive

City

Thousand Oaks

State

CA

Zip Code

91320-1730

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Amgen Inc.

Occupation (for Individual)

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1656.39

Date of Receipt

07 / 31 / 2019

Transaction ID : PR774473766750

Amount of Each Receipt this Period

222.58

☐ Memo Item

P/R Deduction (\$111.29 Bi-Weekly)

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

C. MCCABE, Christopher, M., Mr.,

Mailing Address One Amgen Center Drive

City

Thousand Oaks

State

CA

Zip Code

91320-1730

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Amgen Inc.

Occupation (for Individual)

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 31 / 2019

Transaction ID : PR774477466750

Amount of Each Receipt this Period

40.00

☐ Memo Item

P/R Deduction (\$20.00 Bi-Weekly)

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

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

339.50