

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

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

FOR LINE NUMBER: PAGE 326 OF 1902

(check only one)

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

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NAME OF COMMITTEE (In Full)

PFIZER INC. PAC

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

A. Coburn, Juli, L, ,

Mailing Address Pfizer Inc. Remote Location

City
Washington

State
WA

Zip Code
98001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Pfizer, Inc.

Occupation (for Individual)

Vaccines Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2018

Transaction ID : 2018121210134-4934

Amount of Each Receipt this Period

16.00

☐ Memo Item

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

B. Coburn, Juli, L, ,

Mailing Address Pfizer Inc. Remote Location

City
Washington

State
WA

Zip Code
98001

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Pfizer, Inc.

Occupation (for Individual)

Vaccines Account Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 31 / 2018

Transaction ID : 2018122711135-4908

Amount of Each Receipt this Period

16.00

☐ Memo Item

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

C. Cohen, Steven, R, ,

Mailing Address 1 Giralda Farms

City
Madison

State
NJ

Zip Code
07940-1021

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Pfizer, Inc.

Occupation (for Individual)

Sr. Director, Respiratory

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1008.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 30 / 2018

Transaction ID : 201811299415-5288

Amount of Each Receipt this Period

42.00

☐ Memo Item

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

74.00

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