

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

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

FOR LINE NUMBER: PAGE 63 OF 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Sanofi US Services Inc. Employees' Political Action Committee**

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

**A. Ramey, Jerome, B, ,**

Mailing Address 1715 West 38th Street

City  
Chattanooga

State  
TN

Zip Code  
30750

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Sanofi US Services Inc.

Occupation (for Individual)

Chatterm SVP Corp. Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 05 / 2018

**Transaction ID : A2018-2378734**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Redl, Amy, L, ,**

Mailing Address 55 Corporate Drive

City  
Bridgewater

State  
NJ

Zip Code  
08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Sanofi US Services Inc.

Occupation (for Individual)

Lead Federal Government Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4053.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 12 / 2018

**Transaction ID : A2018-2346244**

Amount of Each Receipt this Period

193.00

☐ Memo Item

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

**C. Repotski, Stacey, , ,**

Mailing Address 55 Corporate Drive

City  
Bridgewater

State  
NJ

Zip Code  
08807

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Sanofi US Services Inc.

Occupation (for Individual)

Medical Managed Care Associate Direct

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 12 / 2018

**Transaction ID : A2018-2346308**

Amount of Each Receipt this Period

26.00

☐ Memo Item

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

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

319.00