

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Bristol-Myers Squibb Co. Employee PAC

ADDRESS (number and street) 345 Park Avenue Check if different than previously reported. (ACC) New York NY 10154

2. FEC IDENTIFICATION NUMBER C00035675 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 06 01 2009 through 06 30 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Joseph Reilly

Signature of Treasurer Electronically Filed by Joseph Reilly Date 07 17 2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Bristol-Myers Squibb Co. Employee PAC

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		26470.50
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	22294.92									
(c) Total Receipts (from Line 19)	11857.64	42847.06								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	34152.56	69317.56								
7. Total Disbursements (from Line 31)	13500.00	48665.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	20652.56	20652.56								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Bristol-Myers Squibb Co. Employee PAC

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	10179.14	25889.07
(ii) Unitemized	1678.50	15957.99
(iii) TOTAL (add Lines 11(a)(i) and (ii)	11857.64	41847.06
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	11857.64	41847.06
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	11857.64	42847.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	11857.64	42847.06

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	465.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	465.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13500.00	45250.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	2950.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	13500.00	48665.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13500.00	48665.00

DETAILED SUMMARY PAGE
of Disbursements

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	11857.64	41847.06
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11857.64	41847.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	465.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	465.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
Bristol-Myers Squibb Co. Employee PAC

A.	Full Name (Last, First, Middle Initial) Lamberto Andreotti		Date of Receipt
	Mailing Address 345 Park Ave.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 02 / 2009
	City	State	Zip Code
	New York	NY	10154
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-3319635
Name of Employer BRISTOL-MYERS SQUIBB CO.		Occupation Executive VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00

B.	Full Name (Last, First, Middle Initial) John Bardi		Date of Receipt
	Mailing Address 345 PARK AVE.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2009
	City	State	Zip Code
	NEW YORK	NY	10154
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-3642679
Name of Employer BRISTOL-MYERS SQUIBB CO.		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		Aggregate Year-to-Date ▼	<input type="text"/> 600.00

C.	Full Name (Last, First, Middle Initial) Scott A Brock		Date of Receipt
	Mailing Address 345 Park Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2009
	City	State	Zip Code
	New York	NY	10154
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-3642571
Name of Employer BRISTOL-MYERS SQUIBB CO.		Occupation ASSOC DIR GOVT AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 42.76
		Aggregate Year-to-Date ▼	<input type="text"/> 256.56

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1142.76
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

A.	Full Name (Last, First, Middle Initial) Victoria Carey	Date of Receipt MM / DD / YYYY 06 / 30 / 2009
	Mailing Address 345 Park Avenue	Transaction ID: A2009-3642648
	City State Zip Code New York NY 10154	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation VP MARKETING PRAVACHOL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Michael C Carozza	Date of Receipt MM / DD / YYYY 06 / 30 / 2009
	Mailing Address 345 Park Avenue	Transaction ID: A2009-3642590
	City State Zip Code New York NY 10154	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation VP FED GOV'T AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2496.00	

C.	Full Name (Last, First, Middle Initial) John E Celentano	Date of Receipt MM / DD / YYYY 06 / 30 / 2009
	Mailing Address 345 Park Avenue	Transaction ID: A2009-3642584
	City State Zip Code New York NY 10154	Amount of Each Receipt this Period 416.66
	FEC ID number of contributing federal political committee. C	
	Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation PRESIDENT HEALTH CARE GRO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2499.96	

SUBTOTAL of Receipts This Page (optional)	882.66
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 21
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

A.

Full Name (Last, First, Middle Initial)
Lane M Church

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer
BRISTOL-MYERS SQUIBB CO.

Occupation
MGR FEDERAL GOVT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.16

Date of Receipt
MM / DD / YYYY
06 / 30 / 2009

Transaction ID: A2009-3642669

Amount of Each Receipt this Period
34.00

B.

Full Name (Last, First, Middle Initial)
James Cornelius

Mailing Address 7012 Hunt Club Dr

City State Zip Code
Zionville IN 46077

FEC ID number of contributing federal political committee. **C**

Name of Employer
BRISTOL-MYERS SQUIBB CO.

Occupation
Chairman & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2009

Transaction ID: A2009-3319646

Amount of Each Receipt this Period
5000.00

C.

Full Name (Last, First, Middle Initial)
Francis M Cuss

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer
BRISTOL-MYERS SQUIBB CO.

Occupation
SR VP DISCOVERY & EXPL CL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2009

Transaction ID: A2009-3642576

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **5134.00**

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

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

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

FOR LINE NUMBER: PAGE 9 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

A. Full Name (Last, First, Middle Initial)
George S Davis

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation SR DBM NEUROSCIENCE.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 06 / 30 / 2009
Transaction ID: A2009-3642560
Amount of Each Receipt this Period: 40.00

B. Full Name (Last, First, Middle Initial)
Jill DeSimone

Mailing Address 345 Park Ave.

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation Sr VP Urology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 06 / 30 / 2009
Transaction ID: A2009-3642672
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Gerald L Geisler

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation DIR ENGINEERING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 487.50

Date of Receipt: 06 / 30 / 2009
Transaction ID: A2009-3642592
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 240.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 21
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

A.

Full Name (Last, First, Middle Initial)
Karen S Gillespie

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation ASSOC DIR GOVT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2009

Transaction ID: A2009-3642636

Amount of Each Receipt this Period
120.00

B.

Full Name (Last, First, Middle Initial)
Sharon A Henry

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation VP GLOBAL LEAD CARDIO AND

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2009

Transaction ID: A2009-3642607

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Anthony C Hooper

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2496.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2009

Transaction ID: A2009-3642671

Amount of Each Receipt this Period
416.00

SUBTOTAL of Receipts This Page (optional) ► **586.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 21
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

A.

Full Name (Last, First, Middle Initial)
Frank Jackson

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation ASSOC DIR GOVT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 281.35

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2009

Transaction ID: A2009-3642549

Amount of Each Receipt this Period
47.64

B.

Full Name (Last, First, Middle Initial)
Floreine R Kahn

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation ASSOC DIR GOVT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 329.95

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2009

Transaction ID: A2009-3642670

Amount of Each Receipt this Period
51.34

C.

Full Name (Last, First, Middle Initial)
Sandra Leung

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation VICE PRESIDENT & CORPORAT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2460.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2009

Transaction ID: A2009-3642623

Amount of Each Receipt this Period
410.00

SUBTOTAL of Receipts This Page (optional) ► **508.98**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

A.	Full Name (Last, First, Middle Initial) Jay B Liska		Date of Receipt
	Mailing Address 345 Park Avenue		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New York	NY	10154
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-3642632
Name of Employer BRISTOL-MYERS SQUIBB CO.		Occupation VICE PRESIDENT VIROLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="337.50"/>	<input type="text" value="50.00"/>

B.	Full Name (Last, First, Middle Initial) Ronald C Miller		Date of Receipt
	Mailing Address 345 Park Avenue		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New York	NY	10154
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-3642628
Name of Employer BRISTOL-MYERS SQUIBB CO.		Occupation SR DIR US POLICY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="493.34"/>	<input type="text" value="84.62"/>

C.	Full Name (Last, First, Middle Initial) Frank C Pasqualone		Date of Receipt
	Mailing Address 345 Park Avenue		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New York	NY	10154
	FEC ID number of contributing federal political committee. C		Transaction ID: A2009-3642567
Name of Employer BRISTOL-MYERS SQUIBB CO.		Occupation SR VP ONCOLOGY	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	<input type="text" value="50.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="184.62"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 13 / 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

A.

Full Name (Last, First, Middle Initial)
Christopher A Pernie

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRISTOL-MYERS SQUIBB CO. MANAGER FEDERAL GOVERNME

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 710.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: A2009-3642593

Amount of Each Receipt this Period
210.00

B.

Full Name (Last, First, Middle Initial)
James R Pooler

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRISTOL-MYERS SQUIBB CO. SR. ENVIRONMENTAL COUNSEL

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: A2009-3642663

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Hilary A Smallwood

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BRISTOL-MYERS SQUIBB CO. SR MEDICAL SCIENCE LIAIS

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 3 0 / 2 0 0 9

Transaction ID: A2009-3642638

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ▶

400.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 21
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

A.

Full Name (Last, First, Middle Initial)
David E Smolin

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer
BRISTOL-MYERS SQUIBB CO.

Occupation
VP PRO THERAPEU PROCESS D

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2009

Transaction ID: A2009-3642610

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mark D Speaker

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer
BRISTOL-MYERS SQUIBB CO.

Occupation
VP & DEPUTY GENERAL COUN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
720.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2009

Transaction ID: A2009-3642587

Amount of Each Receipt this Period
120.00

C.

Full Name (Last, First, Middle Initial)
Shawn Tarrant

Mailing Address 345 PARK AVE.

City State Zip Code
NEW YORK NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer
BRISTOL-MYERS SQUIBB CO.

Occupation
Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2009

Transaction ID: A2009-3642674

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **220.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

A.	Full Name (Last, First, Middle Initial) Richard L Thompson		Date of Receipt	
	Mailing Address 345 Park Avenue		M M / D D / Y Y Y Y Y 06 / 30 / 2009	
	City	State	Zip Code	Transaction ID: A2009-3642615
	New York	NY	10154	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		406.66	
Name of Employer BRISTOL-MYERS SQUIBB CO.		Occupation SVP POLICY & GOVT AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2439.96		

B.	Full Name (Last, First, Middle Initial) Anne E Tweedt		Date of Receipt	
	Mailing Address 345 Park Avenue		M M / D D / Y Y Y Y Y 06 / 30 / 2009	
	City	State	Zip Code	Transaction ID: A2009-3642627
	New York	NY	10154	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		51.82	
Name of Employer BRISTOL-MYERS SQUIBB CO.		Occupation ASSOC DIR STATE GOVT AFFA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 329.04		

C.	Full Name (Last, First, Middle Initial) Gary A Vancleave		Date of Receipt	
	Mailing Address 345 Park Avenue		M M / D D / Y Y Y Y Y 06 / 30 / 2009	
	City	State	Zip Code	Transaction ID: A2009-3642643
	New York	NY	10154	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		51.28	
Name of Employer BRISTOL-MYERS SQUIBB CO.		Occupation FIELD DEVELOPMENT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.32		

SUBTOTAL of Receipts This Page (optional)	▶	509.76
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

A. Full Name (Last, First, Middle Initial)
Susan G Voigt
Mailing Address 345 Park Avenue
City New York State NY Zip Code 10154
FEC ID number of contributing federal political committee. **C**
Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation VP ENV HLTH SAFETY & CORP
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 06 / 30 / 2009
Transaction ID: A2009-3642609
Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
Paul VonAutenried
Mailing Address 345 Park Avenue
City New York State NY Zip Code 10154
FEC ID number of contributing federal political committee. **C**
Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation VP TECHNICAL SERVICES
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 502.03
Date of Receipt 06 / 30 / 2009
Transaction ID: A2009-3642533
Amount of Each Receipt this Period 78.26

C. Full Name (Last, First, Middle Initial)
David E Warr
Mailing Address 345 Park Avenue
City New York State NY Zip Code 10154
FEC ID number of contributing federal political committee. **C**
Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation DIR INTL GOV AFFAIRS
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 227.16
Date of Receipt 06 / 30 / 2009
Transaction ID: A2009-3642554
Amount of Each Receipt this Period 37.86

SUBTOTAL of Receipts This Page (optional) ► 156.12
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 17 / 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

A. Full Name (Last, First, Middle Initial)
Martin Wax

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation VOICE SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 06 / 30 / 2009
Transaction ID: A2009-3642622
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
David L Whitehead

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation ASSOC DIR GOVT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.55

Date of Receipt: 06 / 30 / 2009
Transaction ID: A2009-3642633
Amount of Each Receipt this Period: 62.60

C. Full Name (Last, First, Middle Initial)
Douglas A Young

Mailing Address 345 Park Avenue

City State Zip Code
New York NY 10154

FEC ID number of contributing federal political committee. **C**

Name of Employer BRISTOL-MYERS SQUIBB CO. Occupation EXEC DIRECTOR IME AND GRA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 656.92

Date of Receipt: 06 / 30 / 2009
Transaction ID: A2009-3642542
Amount of Each Receipt this Period: 101.64

SUBTOTAL of Receipts This Page (optional) ► 214.24

TOTAL This Period (last page this line number only) ► 10179.14

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

<p>A. Full Name (Last, First, Middle Initial) Grassley Committee Inc.</p> <p>Mailing Address PO Box 1000</p> <p>City Des Moines State IA Zip Code 50304</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Charles E Grassley</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IA District:</p>	<p>Transaction ID: B268686 Date of Disbursement 06 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B. Full Name (Last, First, Middle Initial) John D. Dingell for Congress Cmte</p> <p>Mailing Address P.O. Box 75214</p> <p>City Washington State DC Zip Code 20013</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name John D Dingell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MI District: 15</p>	<p>Transaction ID: B268667 Date of Disbursement 06 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Bennie Thompson</p> <p>Mailing Address 236 Massachusetts Ave. NE Ste 603</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Bennie G Thompson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MS District: 02</p>	<p>Transaction ID: B268683 Date of Disbursement 06 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional)	5500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

A.	Full Name (Last, First, Middle Initial) Crowley for Congress	Transaction ID: B268677 Date of Disbursement
	Mailing Address 50 E Street SE Suite 1	<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Joseph Crowley	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Engel for Congress	Transaction ID: B268689 Date of Disbursement
	Mailing Address 462 California Road	<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Bronxville State NY Zip Code 10708	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Eliot L Engel	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 17	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends of John Boehner	Transaction ID: B268684 Date of Disbursement
	Mailing Address 104 Hume Avenue	<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Alexandria State VA Zip Code 20895	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name John A Boehner	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

<p>A. Full Name (Last, First, Middle Initial) Friends of John Tanner</p> <p>Mailing Address 236 Massachusetts Ave. Ste 603</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name John S Tanner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: TN District: 08</p>	<p>Transaction ID: B268669 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	3		2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	3		2	0	0	9													
1000.00																						
<p>B. Full Name (Last, First, Middle Initial) Michael Burgess for Congress</p> <p>Mailing Address 217 Third Street SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Michael C. Burgess</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: TX District: 26</p>	<p>Transaction ID: B268688 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	3		2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	3		2	0	0	9													
1000.00																						
<p>C. Full Name (Last, First, Middle Initial) Gene Green Congressional Campaign</p> <p>Mailing Address PO Box 16128</p> <p>City Houston State TX Zip Code 77222</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Raymond E Green</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: TX District: 29</p>	<p>Transaction ID: B268687 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	3		2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		2	3		2	0	0	9													
1000.00																						

SUBTOTAL of Disbursements This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Bristol-Myers Squibb Co. Employee PAC

A.

Full Name (Last, First, Middle Initial)
Inslee for Congress

Transaction ID: B268662

Date of Disbursement

Mailing Address 303 Massachusetts Ave. NE

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	9

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Contribution

011
Category/ Type

Candidate Name
Jay Robert Inslee

Office Sought: House
 Senate
 President
State: WA District: 01

Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

13500.00
