

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)

**PFIZER INC. PAC**

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

**A. Barrett, Francis, Xavier, ,**

Mailing Address 235 East 42nd Street

City  
New YorkState  
NYZip Code  
10017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Pfizer, Inc

Occupation (for Individual)

Director, Specialty Access Solutions &amp;

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

**Transaction ID : 2020052911135-4565**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Bartlett, Grant, , ,**

Mailing Address 235 East 42nd Street

City  
New YorkState  
NYZip Code  
10017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Pfizer Inc

Occupation (for Individual)

SHR Level 2

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

**Transaction ID : 2020052911135-2845**

Amount of Each Receipt this Period

20.84

☐ Memo Item

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

**C. Bastin, Ivelisse, , ,**

Mailing Address 235 East 42nd Street

City  
New YorkState  
NYZip Code  
10017FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Pfizer Inc

Occupation (for Individual)

District Business Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

208.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2020

**Transaction ID : 2020052911135-872**

Amount of Each Receipt this Period

20.84

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

66.68

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