

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

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

FOR LINE NUMBER: PAGE 19 OF 43

(check only one)

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

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NAME OF COMMITTEE (In Full)

**ALLERGAN, INC. POLITICAL ACTION COMMITTEE**

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

**A. Katz, Nicole, , ,**

Mailing Address 5 Giralda Farms

City  
Madison

State  
NJ

Zip Code  
07940

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Allegan, Inc.

Occupation (for Individual)

VP, Corporate Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 05 / 2019

Transaction ID : SA11AI.19288

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

**B. Katz, Nicole, , ,**

Mailing Address 5 Giralda Farms

City  
Madison

State  
NJ

Zip Code  
07940

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Allegan, Inc.

Occupation (for Individual)

VP, Corporate Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 19 / 2019

Transaction ID : SA11AI.19289

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

**C. Lecaue, David, P, ,**

Mailing Address 2525 Dupont Dr

City  
Irvine

State  
CA

Zip Code  
92612

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Allergan USA, Inc.

Occupation (for Individual)

VP, Sales, Eye Care

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 05 / 2019

Transaction ID : SA11AI.19292

Amount of Each Receipt this Period

14.00

☐ Memo Item

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

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

164.00