

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

ADDRESS (number and street) **1020 First Avenue**  
 Check if different than previously reported. (ACC) **King of Prussia PA 19406-0901**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00422501** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 **Parekh, Jigisha, , ,**

Signature of Treasurer **Parekh, Jigisha, , ,** Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2025"/>	<input type="text" value="57016.97"/>	<input type="text" value="57016.97"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="69487.93"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="20256.92"/>	<input type="text" value="32727.88"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="89744.85"/>	<input type="text" value="89744.85"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25000.00"/>	<input type="text" value="25000.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="64744.85"/>	<input type="text" value="64744.85"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Report Covering the Period: From:  /  /  To:  /  /

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).....	15579.94	21575.90
(ii) Unitemized .....	4676.98	11151.98
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	20256.92	32727.88
(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) .....	20256.92	32727.88
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	0.00
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 Transfers (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)).....▶	20256.92	32727.88
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	20256.92	32727.88

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	25000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	25000.00	25000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25000.00	25000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	20256.92	32727.88
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20256.92	32727.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
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	0.00

**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 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Basile, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Senior Accounts Receivable Analyst
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 11 / 14 / 2025  
**Transaction ID : 2025111518219-22**

Amount of Each Receipt this Period  
 10.00

Memo Item

**B. Basile, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Senior Accounts Receivable Analyst
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 11 / 26 / 2025  
**Transaction ID : 2025113018223-58**

Amount of Each Receipt this Period  
 10.00

Memo Item

**C. Basile, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Senior Accounts Receivable Analyst
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 12 / 15 / 2025  
**Transaction ID : 2025121518253-23**

Amount of Each Receipt this Period  
 10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 7 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Basile, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Accounts Receivable Analyst  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-44**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Brennan, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Director, Real Estate, New Center Exp  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 10 / 2025  
**Transaction ID : 2025101518910-4**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Brennan, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Director, Real Estate, New Center Exp  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 24 / 2025  
**Transaction ID : 20251031181011-6**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 8 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Brennan, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Director, Real Estate, New Center Expa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 07 / 2025  
**Transaction ID : 2025111518219-2**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Brennan, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Director, Real Estate, New Center Expa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 21 / 2025  
**Transaction ID : 2025113018223-4**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Brennan, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Director, Real Estate, New Center Expa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 05 / 2025  
**Transaction ID : 2025121518253-2**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 9 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Brennan, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Director, Real Estate, New Center Expa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2025  
**Transaction ID : 2025123118193-5**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Deck, Randall, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Seqirus Inc Occupation (for Individual) Sr Director, Pandemic Contracts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 17 / 2025  
**Transaction ID : 20251031181011-1**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Deck, Randall, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Seqirus Inc Occupation (for Individual) Sr Director, Pandemic Contracts  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 31 / 2025  
**Transaction ID : 20251031181011-66**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 10 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Deck, Randall, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Seqirus Inc Occupation (for Individual) Sr Director, Pandemic Contracts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 14 / 2025  
**Transaction ID : 2025111518219-65**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Deck, Randall, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Seqirus Inc Occupation (for Individual) Sr Director, Pandemic Contracts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 28 / 2025  
**Transaction ID : 2025113018223-66**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Deck, Randall, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Seqirus Inc Occupation (for Individual) Sr Director, Pandemic Contracts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 12 / 2025  
**Transaction ID : 2025121518253-66**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 11 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Deck, Randall, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 26 / 2025 <b>Transaction ID : 2025123118193-7</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 10.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Seqirus Inc		Occupation (for Individual) Sr Director, Pandemic Contracts			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Deem, Michael F, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2025 <b>Transaction ID : 2025111518219-34</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 10.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Global Head CSL Manufacturing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Deem, Michael F, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2025 <b>Transaction ID : 2025113018223-46</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 10.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Global Head CSL Manufacturing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 240.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Deem, Michael F, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2025 <b>Transaction ID : 2025121518253-8</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 10.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Global Head CSL Manufacturing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Deem, Michael F, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2025 <b>Transaction ID : 2025123118193-19</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 10.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Global Head CSL Manufacturing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Donahue, Christine, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 15 / 2025 <b>Transaction ID : 2025071518913-47</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 25.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Medical Outcomes Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 600.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 13 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Donahue, Christine, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Medical Outcomes Specialist
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2025  
**Transaction ID : 2025073118911-51**

Amount of Each Receipt this Period  
25.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Donahue, Christine, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Medical Outcomes Specialist
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 15 / 2025  
**Transaction ID : 2025081518449-40**

Amount of Each Receipt this Period  
25.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Donahue, Christine, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Medical Outcomes Specialist
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2025  
**Transaction ID : 2025083118910-52**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 14 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Donahue, Christine, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Medical Outcomes Specialist
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2025

**Transaction ID : 2025091518712-49**

Amount of Each Receipt this Period  
25.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Donahue, Christine, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Medical Outcomes Specialist
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2025

**Transaction ID : 20250930181211-20**

Amount of Each Receipt this Period  
25.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Donahue, Christine, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Medical Outcomes Specialist
---	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2025

**Transaction ID : 2025101518910-63**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Donahue, Christine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Medical Outcomes Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2025  
**Transaction ID : 20251031181011-16**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Donahue, Christine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Medical Outcomes Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 14 / 2025  
**Transaction ID : 2025111518219-10**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Donahue, Christine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Medical Outcomes Specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 26 / 2025  
**Transaction ID : 2025113018223-54**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> 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 16 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Donahue, Christine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Medical Outcomes Specialist  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **12 / 15 / 2025**  
**Transaction ID : 2025121518253-22**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Donahue, Christine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Medical Outcomes Specialist  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **12 / 31 / 2025**  
**Transaction ID : 2025123118193-46**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Dudt, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) TMO Lead  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 14 / 2025**  
**Transaction ID : 2025111518219-17**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 17 OF 102
<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

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Dudt, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) TMO Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 26 / 2025**  
**Transaction ID : 2025113018223-31**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Dudt, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) TMO Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **12 / 15 / 2025**  
**Transaction ID : 2025121518253-26**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Dudt, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) TMO Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **12 / 31 / 2025**  
**Transaction ID : 2025123118193-57**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 18 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Ellzey, Max, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2025 <b>Transaction ID : 2025111518219-35</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 10.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 240.00		
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Executive Area Manager, Immunology	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ellzey, Max, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2025 <b>Transaction ID : 2025113018223-35</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 10.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 240.00		
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Executive Area Manager, Immunology	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Ellzey, Max, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2025 <b>Transaction ID : 2025121518253-59</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 10.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 240.00		
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Executive Area Manager, Immunology	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 19 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Ellzey, Max, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Area Manager, Immunology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-61**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Fischesser, Kirk, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director National Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 15 / 2025  
**Transaction ID : 2025071518913-12**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Fischesser, Kirk, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director National Accounts  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 31 / 2025  
**Transaction ID : 2025073118911-18**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 20 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Fischesser, Kirk, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Associate Director National Accounts
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2025

**Transaction ID : 2025081518449-29**

Amount of Each Receipt this Period  
25.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Fischesser, Kirk, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Associate Director National Accounts
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2025

**Transaction ID : 2025083118910-9**

Amount of Each Receipt this Period  
25.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Fischesser, Kirk, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Associate Director National Accounts
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2025

**Transaction ID : 2025091518712-35**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 21 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Fischesser, Kirk, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director National Accounts  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 30 / 2025**  
**Transaction ID : 20250930181211-13**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Fischesser, Kirk, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director National Accounts  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 15 / 2025**  
**Transaction ID : 2025101518910-56**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Fischesser, Kirk, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director National Accounts  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 31 / 2025**  
**Transaction ID : 20251031181011-64**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 22 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Fischesser, Kirk, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director National Accounts  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 14 / 2025  
**Transaction ID : 2025111518219-20**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Fischesser, Kirk, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director National Accounts  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 26 / 2025  
**Transaction ID : 2025113018223-14**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Fischesser, Kirk, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director National Accounts  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 15 / 2025  
**Transaction ID : 2025121518253-55**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 23 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Fischesser, Kirk, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director National Accounts  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-12**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Gregory, Marlene, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Sr. Regional Sales Manager - Coagulat  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-16**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Guinan, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Director, Hospital Sales  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 14 / 2025  
**Transaction ID : 2025111518219-33**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 24 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Guinan, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Director, Hospital Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 26 / 2025  
**Transaction ID : 2025113018223-45**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Guinan, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Director, Hospital Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2025  
**Transaction ID : 2025121518253-16**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Guinan, Joseph, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Director, Hospital Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-18**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 25 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Hatcher, Emanuela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 902 William Meade Ct  
 City Davidsonville State MD Zip Code 21035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Director, US Patient Advocacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2025  
**Transaction ID : 1991BF96384C4B2FA744**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item

**B. Hewitt, Sarah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Area Manager-Immunology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 14 / 2025  
**Transaction ID : 2025111518219-21**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Hewitt, Sarah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Area Manager-Immunology  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 26 / 2025  
**Transaction ID : 2025113018223-50**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1520.00
<b>TOTAL</b> 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 26 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Hewitt, Sarah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Area Manager-Immunology  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2025  
**Transaction ID : 2025121518253-45**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Hewitt, Sarah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Area Manager-Immunology  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-10**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Hill, Tanya, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Director, Patient Experience  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 1218.78

Date of Receipt 09 / 15 / 2025  
**Transaction ID : 2025091518712-42**  
 Amount of Each Receipt this Period 135.42  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	155.42
<b>TOTAL</b> 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 27 OF 102
<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Hill, Tanya, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Executive Director, Patient Experience
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1218.78

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2025

**Transaction ID : 20250930181211-43**

Amount of Each Receipt this Period  
135.42

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Hill, Tanya, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Executive Director, Patient Experience
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1218.78

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2025

**Transaction ID : 2025101518910-36**

Amount of Each Receipt this Period  
135.42

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Hill, Tanya, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Executive Director, Patient Experience
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1218.78

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2025

**Transaction ID : 20251031181011-35**

Amount of Each Receipt this Period  
135.42

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	406.26
<b>TOTAL</b> 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 28 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Hill, Tanya, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Executive Director, Patient Experience
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1218.78

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2025

**Transaction ID : 2025111518219-62**

Amount of Each Receipt this Period  
135.42

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Hill, Tanya, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Executive Director, Patient Experience
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1218.78

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2025

**Transaction ID : 2025113018223-42**

Amount of Each Receipt this Period  
135.42

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Hill, Tanya, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Executive Director, Patient Experience
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
1218.78

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2025

**Transaction ID : 2025121518253-61**

Amount of Each Receipt this Period  
135.42

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	406.26
<b>TOTAL</b> 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 29 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Hill, Tanya, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Director, Patient Experience  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1218.78

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-53**  
 Amount of Each Receipt this Period 135.42  
 Memo Item

**B. Huke, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Director of the central Services Group  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 14 / 2025  
**Transaction ID : 2025111518219-40**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Huke, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Director of the central Services Group  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 26 / 2025  
**Transaction ID : 2025113018223-30**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	155.42
<b>TOTAL</b> 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 30 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Huke, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Director of the central Services Group  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2025  
**Transaction ID : 2025121518253-44**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Huke, Timothy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Director of the central Services Group  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-60**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Hundley, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Field Operations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt 09 / 15 / 2025  
**Transaction ID : 2025091518712-56**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	124.17
<b>TOTAL</b> 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 31 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Hundley, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Field Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt **09 / 30 / 2025**  
**Transaction ID : 20250930181211-51**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Hundley, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Field Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt **10 / 15 / 2025**  
**Transaction ID : 2025101518910-54**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Hundley, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Field Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt **10 / 31 / 2025**  
**Transaction ID : 20251031181011-14**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	312.51
<b>TOTAL</b> 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 32 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Hundley, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Field Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt 11 / 14 / 2025  
**Transaction ID : 2025111518219-57**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Hundley, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Field Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt 11 / 26 / 2025  
**Transaction ID : 2025113018223-10**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Hundley, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Field Operations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt 12 / 15 / 2025  
**Transaction ID : 2025121518253-29**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	312.51
<b>TOTAL</b> 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 33 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Hundley, Susan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Field Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-49**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Hyatt, Kelley L, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Senior Director Quality Assurance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 10 / 2025  
**Transaction ID : 2025101518910-3**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Hyatt, Kelley L, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Senior Director Quality Assurance  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 24 / 2025  
**Transaction ID : 20251031181011-3**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	124.17
<b>TOTAL</b> 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 34 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Hyatt, Kelley L, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Plasma	Occupation (for Individual) Senior Director Quality Assurance
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 07 / 2025  
**Transaction ID : 2025111518219-5**

Amount of Each Receipt this Period  
10.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Hyatt, Kelley L, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Plasma	Occupation (for Individual) Senior Director Quality Assurance
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 21 / 2025  
**Transaction ID : 2025113018223-2**

Amount of Each Receipt this Period  
10.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Hyatt, Kelley L, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Plasma	Occupation (for Individual) Senior Director Quality Assurance
---	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 05 / 2025  
**Transaction ID : 2025121518253-5**

Amount of Each Receipt this Period  
10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 35 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Hyatt, Kelley L, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Plasma	Occupation (for Individual) Senior Director Quality Assurance
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2025  
**Transaction ID : 2025123118193-2**

Amount of Each Receipt this Period  
10.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Jens, Paul, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Vice President, Strategic Head of Pric
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2025  
**Transaction ID : 2025073118911-33**

Amount of Each Receipt this Period  
15.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Jens, Paul, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Vice President, Strategic Head of Pric
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 15 / 2025  
**Transaction ID : 2025081518449-35**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	40.00
<b>TOTAL</b> 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 36 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Jens, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Vice President, Strategic Head of Pric  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 29 / 2025  
**Transaction ID : 2025083118910-40**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Jens, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Vice President, Strategic Head of Pric  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 15 / 2025  
**Transaction ID : 2025091518712-32**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Jens, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Vice President, Strategic Head of Pric  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 30 / 2025  
**Transaction ID : 20250930181211-65**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 37 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Jens, Paul, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Vice President, Strategic Head of Pric
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2025  
**Transaction ID : 2025101518910-30**

Amount of Each Receipt this Period  
15.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Jens, Paul, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Vice President, Strategic Head of Pric
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2025  
**Transaction ID : 20251031181011-24**

Amount of Each Receipt this Period  
15.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Jens, Paul, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Vice President, Strategic Head of Pric
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 14 / 2025  
**Transaction ID : 2025111518219-39**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 38 OF 102
<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Jens, Paul, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Vice President, Strategic Head of Pric
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2025

**Transaction ID : 2025113018223-38**

Amount of Each Receipt this Period  
15.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Jens, Paul, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Vice President, Strategic Head of Pric
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2025

**Transaction ID : 2025121518253-49**

Amount of Each Receipt this Period  
15.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Jens, Paul, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Vice President, Strategic Head of Pric
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2025

**Transaction ID : 2025123118193-64**

Amount of Each Receipt this Period  
15.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 39 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Kiefer, Uli, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Executive Director, EAO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 11 / 14 / 2025  
**Transaction ID : 2025111518219-16**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Kiefer, Uli, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Executive Director, EAO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 11 / 26 / 2025  
**Transaction ID : 2025113018223-51**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Kiefer, Uli, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Executive Director, EAO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 12 / 15 / 2025  
**Transaction ID : 2025121518253-46**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 40 OF 102
<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

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Kiefer, Uli, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Executive Director, EAO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2025  
**Transaction ID : 2025123118193-9**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**B. Kriner, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Sr. Manager, Portfolio Support  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 14 / 2025  
**Transaction ID : 2025111518219-56**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

**C. Kriner, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Sr. Manager, Portfolio Support  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 26 / 2025  
**Transaction ID : 2025113018223-7**  
 Amount of Each Receipt this Period  
 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 41 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Kriner, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Sr. Manager, Portfolio Support  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2025  
**Transaction ID : 2025121518253-58**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Kriner, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Sr. Manager, Portfolio Support  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-51**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Litten, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Manager Coagulation Products  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 14 / 2025  
**Transaction ID : 2025111518219-53**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 42 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Litten, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Manager Coagulation Products  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 26 / 2025**  
**Transaction ID : 2025113018223-65**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Litten, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Manager Coagulation Products  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt **12 / 15 / 2025**  
**Transaction ID : 2025121518253-50**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Litten, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Manager Coagulation Products  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt **12 / 31 / 2025**  
**Transaction ID : 2025123118193-24**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 43 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Logsdon, Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director, Regional Accounts  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 14 / 2025  
**Transaction ID : 2025111518219-45**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Logsdon, Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director, Regional Accounts  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 26 / 2025  
**Transaction ID : 2025113018223-16**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Logsdon, Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director, Regional Accounts  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2025  
**Transaction ID : 2025121518253-37**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 44 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Logsdon, Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director, Regional Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **12 / 31 / 2025**  
**Transaction ID : 2025123118193-30**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Lojewski, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) SVP, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **07 / 15 / 2025**  
**Transaction ID : 2025071518913-14**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Lojewski, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) SVP, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt **07 / 31 / 2025**  
**Transaction ID : 2025073118911-10**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.00
<b>TOTAL</b> 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 45 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Lojewski, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) SVP, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 15 / 2025  
**Transaction ID : 2025081518449-10**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Lojewski, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) SVP, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 08 / 29 / 2025  
**Transaction ID : 2025083118910-17**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. Lojewski, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) SVP, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 15 / 2025  
**Transaction ID : 2025091518712-8**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 46 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Lojewski, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) SVP, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 30 / 2025  
**Transaction ID : 20250930181211-48**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Maloney, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Federal Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1218.78

Date of Receipt 09 / 15 / 2025  
**Transaction ID : 2025091518712-45**  
 Amount of Each Receipt this Period 135.42  
 Memo Item

**C. Maloney, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Federal Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1218.78

Date of Receipt 09 / 30 / 2025  
**Transaction ID : 20250930181211-25**  
 Amount of Each Receipt this Period 135.42  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	320.84
<b>TOTAL</b> 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 47 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Maloney, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Federal Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1218.78

Date of Receipt 10 / 15 / 2025  
**Transaction ID : 2025101518910-39**  
 Amount of Each Receipt this Period 135.42  
 Memo Item

**B. Maloney, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Federal Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1218.78

Date of Receipt 10 / 31 / 2025  
**Transaction ID : 20251031181011-21**  
 Amount of Each Receipt this Period 135.42  
 Memo Item

**C. Maloney, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Federal Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1218.78

Date of Receipt 11 / 14 / 2025  
**Transaction ID : 2025111518219-58**  
 Amount of Each Receipt this Period 135.42  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	406.26
<b>TOTAL</b> 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 48 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Maloney, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Federal Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1218.78

Date of Receipt **11 / 26 / 2025**  
**Transaction ID : 2025113018223-48**  
 Amount of Each Receipt this Period 135.42  
 Memo Item

**B. Maloney, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Federal Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1218.78

Date of Receipt **12 / 15 / 2025**  
**Transaction ID : 2025121518253-14**  
 Amount of Each Receipt this Period 135.42  
 Memo Item

**C. Maloney, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, Federal Affairs  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1218.78

Date of Receipt **12 / 31 / 2025**  
**Transaction ID : 2025123118193-47**  
 Amount of Each Receipt this Period 135.42  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	406.26
<b>TOTAL</b> 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 49 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Martinez, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Director, State Government Affairs --  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2025  
**Transaction ID : 2025123118193-63**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. Masterson, Shawn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director Commercial Learnin  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2025  
**Transaction ID : 2025123118193-58**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. McCaslin, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Reg Regulatory Lead US  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2025  
**Transaction ID : 2025073118911-9**  
 Amount of Each Receipt this Period  
 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> 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 50 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. McCaslin, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Reg Regulatory Lead US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 15 / 2025  
**Transaction ID : 2025081518449-16**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. McCaslin, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Reg Regulatory Lead US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 29 / 2025  
**Transaction ID : 2025083118910-30**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. McCaslin, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Reg Regulatory Lead US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 09 / 15 / 2025  
**Transaction ID : 2025091518712-59**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 51 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. McCaslin, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Reg Regulatory Lead US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **09 / 30 / 2025**  
**Transaction ID : 20250930181211-49**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. McCaslin, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Reg Regulatory Lead US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **10 / 15 / 2025**  
**Transaction ID : 2025101518910-49**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. McCaslin, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Reg Regulatory Lead US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **10 / 31 / 2025**  
**Transaction ID : 20251031181011-47**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 52 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. McCaslin, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Reg Regulatory Lead US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **11 / 14 / 2025**  
**Transaction ID : 2025111518219-26**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. McCaslin, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Reg Regulatory Lead US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **11 / 26 / 2025**  
**Transaction ID : 2025113018223-20**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. McCaslin, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Reg Regulatory Lead US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **12 / 15 / 2025**  
**Transaction ID : 2025121518253-47**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 54 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Miller, Patrice, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Field Reimbursement Manager  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt **12 / 15 / 2025**  
**Transaction ID : 2025121518253-60**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Miller, Patrice, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Field Reimbursement Manager  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt **12 / 31 / 2025**  
**Transaction ID : 2025123118193-62**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Morando, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Area Manager-Immunology  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 15 / 2025**  
**Transaction ID : 2025071518913-41**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 55 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Morando, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Area Manager-Immunology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 31 / 2025**  
**Transaction ID : 2025073118911-32**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Morando, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Area Manager-Immunology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 15 / 2025**  
**Transaction ID : 2025081518449-33**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Morando, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Area Manager-Immunology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 29 / 2025**  
**Transaction ID : 2025083118910-35**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 56 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Morando, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Area Manager-Immunology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2025  
**Transaction ID : 2025091518712-48**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Morando, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Area Manager-Immunology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2025  
**Transaction ID : 20250930181211-67**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Morando, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Area Manager-Immunology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2025  
**Transaction ID : 2025101518910-29**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 57 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Morando, Martha, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2025 <b>Transaction ID : 20251031181011-25</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 25.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Executive Area Manager-Immunology			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Morando, Martha, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2025 <b>Transaction ID : 2025111518219-38</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 25.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Executive Area Manager-Immunology			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Morando, Martha, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2025 <b>Transaction ID : 2025113018223-36</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 25.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Executive Area Manager-Immunology			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 600.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 58 OF 102
	<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	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Morando, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Area Manager-Immunology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 15 / 2025  
**Transaction ID : 2025121518253-53**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Morando, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Executive Area Manager-Immunology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-65**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Neff, John, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate General Counsel, North Amer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 15 / 2025  
**Transaction ID : 2025071518913-30**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> 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 59 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Neff, John, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate General Counsel, North Ame  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **07 / 31 / 2025**  
**Transaction ID : 2025073118911-26**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Neff, John, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate General Counsel, North Ame  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 15 / 2025**  
**Transaction ID : 2025081518449-26**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Neff, John, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate General Counsel, North Amer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **08 / 29 / 2025**  
**Transaction ID : 2025083118910-45**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 60 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Neff, John, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate General Counsel, North Ame  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 15 / 2025**  
**Transaction ID : 2025091518712-27**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Neff, John, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate General Counsel, North Ame  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt **09 / 30 / 2025**  
**Transaction ID : 20250930181211-22**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Neff, John, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate General Counsel, North Amer  
 Receipt For:  Primary  General  Other (specify) Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 15 / 2025**  
**Transaction ID : 2025101518910-22**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 61 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Neff, John, , , Jr.</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2025 <b>Transaction ID : 20251031181011-56</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 25.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Associate General Counsel, North Ame			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Neff, John, , , Jr.</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2025 <b>Transaction ID : 2025111518219-48</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 25.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Associate General Counsel, North Ame			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Neff, John, , , Jr.</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 26 / 2025 <b>Transaction ID : 2025113018223-15</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 25.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Associate General Counsel, North Amer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 600.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 62 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Neff, John, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Associate General Counsel, North Ame
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2025

**Transaction ID : 2025121518253-43**

Amount of Each Receipt this Period  
 25.00

Memo Item

**B. Neff, John, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Associate General Counsel, North Ame
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2025

**Transaction ID : 2025123118193-32**

Amount of Each Receipt this Period  
 25.00

Memo Item

**C. O'Connor, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Sr Manager, Donation
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 14 / 2025

**Transaction ID : 2025111518219-32**

Amount of Each Receipt this Period  
 10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> 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 63 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
O'Connor, Andrew, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Sr Manager, Donation
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2025

**Transaction ID : 2025113018223-44**

Amount of Each Receipt this Period  
10.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
O'Connor, Andrew, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Sr Manager, Donation
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2025

**Transaction ID : 2025121518253-13**

Amount of Each Receipt this Period  
10.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
O'Connor, Andrew, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Sr Manager, Donation
---	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2025

**Transaction ID : 2025123118193-34**

Amount of Each Receipt this Period  
10.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 64 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Ogden, Emily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Director, State Government Affairs --  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 865.35

Date of Receipt **09 / 26 / 2025**  
**Transaction ID : 20250930181211-4**  
 Amount of Each Receipt this Period 96.15  
 Memo Item

**B. Ogden, Emily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Director, State Government Affairs --  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 865.35

Date of Receipt **10 / 10 / 2025**  
**Transaction ID : 2025101518910-5**  
 Amount of Each Receipt this Period 96.15  
 Memo Item

**C. Ogden, Emily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Director, State Government Affairs --  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 865.35

Date of Receipt **10 / 24 / 2025**  
**Transaction ID : 20251031181011-2**  
 Amount of Each Receipt this Period 96.15  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	288.45
<b>TOTAL</b> 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 65 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Ogden, Emily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Director, State Government Affairs --  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 865.35

Date of Receipt 11 / 07 / 2025  
**Transaction ID : 2025111518219-6**  
 Amount of Each Receipt this Period 96.15  
 Memo Item

**B. Ogden, Emily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Director, State Government Affairs --  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 865.35

Date of Receipt 11 / 21 / 2025  
**Transaction ID : 2025113018223-1**  
 Amount of Each Receipt this Period 96.15  
 Memo Item

**C. Ogden, Emily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Director, State Government Affairs --  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 865.35

Date of Receipt 12 / 05 / 2025  
**Transaction ID : 2025121518253-1**  
 Amount of Each Receipt this Period 96.15  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	288.45
<b>TOTAL</b> 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 66 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Ogden, Emily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia    State PA    Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma    Occupation (for Individual) Director, State Government Affairs --  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 865.35

Date of Receipt **12 / 19 / 2025**  
**Transaction ID : 2025123118193-1**  
 Amount of Each Receipt this Period 96.15  
 Memo Item

**B. Parker, Corey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia    State PA    Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C.    Occupation (for Individual) Sr. Director, Coagulation Sales  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 14 / 2025**  
**Transaction ID : 2025111518219-44**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Parker, Corey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia    State PA    Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C.    Occupation (for Individual) Sr. Director, Coagulation Sales  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 26 / 2025**  
**Transaction ID : 2025113018223-9**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	116.15
<b>TOTAL</b> 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 67 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Parker, Corey, , ,</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 15 / 2025 <b>Transaction ID : 2025121518253-38</b>
Mailing Address 1020 1st Ave		Amount of Each Receipt this Period 10.00
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Sr. Director, Coagulation Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Parker, Corey, , ,</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2025 <b>Transaction ID : 2025123118193-31</b>
Mailing Address 1020 1st Ave		Amount of Each Receipt this Period 10.00
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Sr. Director, Coagulation Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Pura, Roy, , ,</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 14 / 2025 <b>Transaction ID : 2025111518219-7</b>
Mailing Address 1020 1st Ave		Amount of Each Receipt this Period 10.00
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Senior Director, State Government Affa	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 68 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Pura, Roy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, State Government Affa  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 26 / 2025  
**Transaction ID : 2025113018223-17**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Pura, Roy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, State Government Affa  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2025  
**Transaction ID : 2025121518253-27**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Pura, Roy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Director, State Government Affa  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-40**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 69 OF 102		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
REUTHER, MARY-LACEY, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Head of US PAGA
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4992.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2025

**Transaction ID : 2025071518913-36**

Amount of Each Receipt this Period  
208.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
REUTHER, MARY-LACEY, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Head of US PAGA
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4992.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2025

**Transaction ID : 2025073118911-55**

Amount of Each Receipt this Period  
208.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
REUTHER, MARY-LACEY, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Head of US PAGA
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4992.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 15 / 2025

**Transaction ID : 2025081518449-17**

Amount of Each Receipt this Period  
208.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	624.00
<b>TOTAL</b> 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 70 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. REUTHER, MARY-LACEY, , ,</b>		Date of Receipt
Mailing Address 1020 1st Ave		<input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2025"/>
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2025083118910-31</b>
Name of Employer (for Individual) CSL Behring L.L.C.		Amount of Each Receipt this Period <input type="text" value="208.00"/>
Occupation (for Individual) Head of US PAGA		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="4992.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. REUTHER, MARY-LACEY, , ,</b>		Date of Receipt
Mailing Address 1020 1st Ave		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2025"/>
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2025091518712-62</b>
Name of Employer (for Individual) CSL Behring L.L.C.		Amount of Each Receipt this Period <input type="text" value="208.00"/>
Occupation (for Individual) Head of US PAGA		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="4992.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. REUTHER, MARY-LACEY, , ,</b>		Date of Receipt
Mailing Address 1020 1st Ave		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2025"/>
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20250930181211-32</b>
Name of Employer (for Individual) CSL Behring L.L.C.		Amount of Each Receipt this Period <input type="text" value="208.00"/>
Occupation (for Individual) Head of US PAGA		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="4992.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="624.00"/>
<b>TOTAL</b> 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 71 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. REUTHER, MARY-LACEY, , ,</b>		Date of Receipt
Mailing Address 1020 1st Ave		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2025"/>
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2025101518910-51</b>
Name of Employer (for Individual) CSL Behring L.L.C.		Amount of Each Receipt this Period <input type="text" value="208.00"/>
Occupation (for Individual) Head of US PAGA		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="4992.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. REUTHER, MARY-LACEY, , ,</b>		Date of Receipt
Mailing Address 1020 1st Ave		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2025"/>
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 20251031181011-48</b>
Name of Employer (for Individual) CSL Behring L.L.C.		Amount of Each Receipt this Period <input type="text" value="208.00"/>
Occupation (for Individual) Head of US PAGA		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="4992.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. REUTHER, MARY-LACEY, , ,</b>		Date of Receipt
Mailing Address 1020 1st Ave		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2025"/>
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2025111518219-25</b>
Name of Employer (for Individual) CSL Behring L.L.C.		Amount of Each Receipt this Period <input type="text" value="208.00"/>
Occupation (for Individual) Head of US PAGA		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="4992.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="624.00"/>
<b>TOTAL</b> 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 72 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. REUTHER, MARY-LACEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Head of US PAGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4992.00

Date of Receipt **11 / 26 / 2025**  
**Transaction ID : 2025113018223-19**  
 Amount of Each Receipt this Period 208.00  
 Memo Item

**B. REUTHER, MARY-LACEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Head of US PAGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4992.00

Date of Receipt **12 / 15 / 2025**  
**Transaction ID : 2025121518253-48**  
 Amount of Each Receipt this Period 208.00  
 Memo Item

**C. REUTHER, MARY-LACEY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Head of US PAGA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4992.00

Date of Receipt **12 / 31 / 2025**  
**Transaction ID : 2025123118193-37**  
 Amount of Each Receipt this Period 208.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	624.00
<b>TOTAL</b> 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 73 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Ruggiero, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Head, CSL Behring & CSL Vifor CEA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4999.92

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2025  
**Transaction ID : 2025071518913-37**  
 Amount of Each Receipt this Period  
 208.33  
 Memo Item

**B. Ruggiero, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Head, CSL Behring & CSL Vifor CEA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4999.92

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 31 / 2025  
**Transaction ID : 2025073118911-36**  
 Amount of Each Receipt this Period  
 208.33  
 Memo Item

**C. Ruggiero, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Head, CSL Behring & CSL Vifor CEA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4999.92

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2025  
**Transaction ID : 2025081518449-36**  
 Amount of Each Receipt this Period  
 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	624.99
<b>TOTAL</b> 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 74 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Ruggiero, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Head, CSL Behring & CSL Vifor CEA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4999.92

Date of Receipt 08 / 29 / 2025  
**Transaction ID : 2025083118910-12**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**B. Ruggiero, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Head, CSL Behring & CSL Vifor CEA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4999.92

Date of Receipt 09 / 15 / 2025  
**Transaction ID : 2025091518712-36**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**C. Ruggiero, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Head, CSL Behring & CSL Vifor CEA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4999.92

Date of Receipt 09 / 30 / 2025  
**Transaction ID : 20250930181211-27**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	624.99
<b>TOTAL</b> 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 75 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Ruggiero, Michael, , ,</b>			Date of Receipt MM / DD / YYYY 10 / 15 / 2025 <b>Transaction ID : 2025101518910-58</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 208.33		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Head, CSL Behring & CSL Vifor CEA			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4999.92			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ruggiero, Michael, , ,</b>			Date of Receipt MM / DD / YYYY 10 / 31 / 2025 <b>Transaction ID : 20251031181011-37</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 208.33		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Head, CSL Behring & CSL Vifor CEA			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4999.92			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Ruggiero, Michael, , ,</b>			Date of Receipt MM / DD / YYYY 11 / 14 / 2025 <b>Transaction ID : 2025111518219-59</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 208.33		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Head, CSL Behring & CSL Vifor CEA			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 4999.92			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	624.99
<b>TOTAL</b> 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 76 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Ruggiero, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Head, CSL Behring & CSL Vifor CEA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4999.92

Date of Receipt  
 11 / 26 / 2025  
**Transaction ID : 2025113018223-49**  
 Amount of Each Receipt this Period  
 208.33  
 Memo Item

**B. Ruggiero, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Head, CSL Behring & CSL Vifor CEA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4999.92

Date of Receipt  
 12 / 15 / 2025  
**Transaction ID : 2025121518253-33**  
 Amount of Each Receipt this Period  
 208.33  
 Memo Item

**C. Ruggiero, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Head, CSL Behring & CSL Vifor CEA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4999.92

Date of Receipt  
 12 / 31 / 2025  
**Transaction ID : 2025123118193-48**  
 Amount of Each Receipt this Period  
 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	624.99
<b>TOTAL</b> 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 77 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Sacristan Siffredi, Diego, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) SVP, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt 09 / 15 / 2025  
**Transaction ID : 2025091518712-44**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Sacristan Siffredi, Diego, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) SVP, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt 09 / 30 / 2025  
**Transaction ID : 20250930181211-30**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Sacristan Siffredi, Diego, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) SVP, US  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt 10 / 15 / 2025  
**Transaction ID : 2025101518910-40**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	312.51
<b>TOTAL</b> 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 78 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Sacristan Siffredi, Diego, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. SVP, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 31 / 2025  
**Transaction ID : 20251031181011-22**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

**B. Sacristan Siffredi, Diego, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. SVP, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 14 / 2025  
**Transaction ID : 2025111518219-11**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

**C. Sacristan Siffredi, Diego, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. SVP, US  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 26 / 2025  
**Transaction ID : 2025113018223-62**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	312.51
<b>TOTAL</b> 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 79 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Sacristan Siffredi, Diego, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) SVP, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt 12 / 15 / 2025  
**Transaction ID : 2025121518253-12**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Sacristan Siffredi, Diego, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) SVP, US  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.53

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-35**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Schmeltz, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Chief Commercial Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 624.99

Date of Receipt 11 / 26 / 2025  
**Transaction ID : 2025113018223-59**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	416.67
<b>TOTAL</b> 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 80 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Schmeltz, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Chief Commercial Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 624.99

Date of Receipt **12 / 15 / 2025**  
**Transaction ID : 2025121518253-35**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**B. Schmeltz, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Chief Commercial Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 624.99

Date of Receipt **12 / 31 / 2025**  
**Transaction ID : 2025123118193-45**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**C. Sevchik, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Associate Director, Corporate Accounts  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 14 / 2025**  
**Transaction ID : 2025111518219-64**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	426.66
<b>TOTAL</b> 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 81 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Sevchik, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Associate Director, Corporate Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **11 / 26 / 2025**  
**Transaction ID : 2025113018223-40**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Sevchik, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Associate Director, Corporate Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **12 / 15 / 2025**  
**Transaction ID : 2025121518253-62**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Sevchik, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Associate Director, Corporate Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **12 / 31 / 2025**  
**Transaction ID : 2025123118193-54**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 82 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Shah, Stephanie D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Associate Director, Quality  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 10 / 2025  
**Transaction ID : 2025101518910-6**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Shah, Stephanie D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Associate Director, Quality  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 10 / 24 / 2025  
**Transaction ID : 20251031181011-4**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Shah, Stephanie D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Associate Director, Quality  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 07 / 2025  
**Transaction ID : 2025111518219-4**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 83 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Shah, Stephanie D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Associate Director, Quality  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 21 / 2025  
**Transaction ID : 2025113018223-5**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Shah, Stephanie D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Associate Director, Quality  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 05 / 2025  
**Transaction ID : 2025121518253-3**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Shah, Stephanie D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Plasma Occupation (for Individual) Associate Director, Quality  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 19 / 2025  
**Transaction ID : 2025123118193-3**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> 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 84 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Spuckti, Christian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Metrics & Analytics Head  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2025  
**Transaction ID : 2025071518913-50**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Spuckti, Christian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Metrics & Analytics Head  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2025  
**Transaction ID : 2025073118911-43**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Spuckti, Christian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Metrics & Analytics Head  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 15 / 2025  
**Transaction ID : 2025081518449-49**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> 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 85 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Spuckti, Christian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Metrics & Analytics Head  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 29 / 2025  
**Transaction ID : 2025083118910-62**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Spuckti, Christian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Metrics & Analytics Head  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 15 / 2025  
**Transaction ID : 2025091518712-40**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Spuckti, Christian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Metrics & Analytics Head  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 30 / 2025  
**Transaction ID : 20250930181211-45**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 86 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Spuckti, Christian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Metrics & Analytics Head  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 15 / 2025  
**Transaction ID : 2025101518910-37**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Spuckti, Christian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Metrics & Analytics Head  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 31 / 2025  
**Transaction ID : 20251031181011-36**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**C. Spuckti, Christian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Metrics & Analytics Head  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 14 / 2025  
**Transaction ID : 2025111518219-61**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> 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 87 OF 102
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Spuckti, Christian, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Metrics & Analytics Head
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2025

**Transaction ID : 2025113018223-43**

Amount of Each Receipt this Period  
25.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Spuckti, Christian, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Metrics & Analytics Head
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2025

**Transaction ID : 2025121518253-63**

Amount of Each Receipt this Period  
25.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Spuckti, Christian, , ,

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Metrics & Analytics Head
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2025

**Transaction ID : 2025123118193-55**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> 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 88 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Szott, Lynne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Field Reimbursement Manager  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt **07 / 31 / 2025**  
**Transaction ID : 2025073118911-13**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Szott, Lynne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Field Reimbursement Manager  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt **08 / 15 / 2025**  
**Transaction ID : 2025081518449-24**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Szott, Lynne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Field Reimbursement Manager  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt **08 / 29 / 2025**  
**Transaction ID : 2025083118910-13**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 89 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Szott, Lynne, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2025 <b>Transaction ID : 2025091518712-25</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 15.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 360.00		
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Senior Field Reimbursement Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Szott, Lynne, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2025 <b>Transaction ID : 20250930181211-52</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 15.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 360.00		
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Senior Field Reimbursement Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Szott, Lynne, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2025 <b>Transaction ID : 2025101518910-26</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 15.00		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 360.00		
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Senior Field Reimbursement Manager	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 90 OF 102
<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Szott, Lynne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Field Reimbursement Manager  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt 10 / 31 / 2025  
**Transaction ID : 20251031181011-10**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**B. Szott, Lynne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Field Reimbursement Manager  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 14 / 2025  
**Transaction ID : 2025111518219-42**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

**C. Szott, Lynne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Senior Field Reimbursement Manager  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt 11 / 26 / 2025  
**Transaction ID : 2025113018223-21**  
 Amount of Each Receipt this Period 15.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> 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 91 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Szott, Lynne, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 15 / 2025 <b>Transaction ID : 2025121518253-34</b>
Mailing Address 1020 1st Ave		Amount of Each Receipt this Period 15.00
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Senior Field Reimbursement Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Szott, Lynne, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2025 <b>Transaction ID : 2025123118193-29</b>
Mailing Address 1020 1st Ave		Amount of Each Receipt this Period 15.00
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Senior Field Reimbursement Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Vessal, Moshe A, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2025 <b>Transaction ID : 2025111518219-43</b>
Mailing Address 1020 1st Ave		Amount of Each Receipt this Period 10.00
City King of Prussia	State PA	Zip Code 19406
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Global Security Program Director for M	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 240.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<b>TOTAL</b> 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 92 OF 102
	<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	

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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Vessal, Moshe A, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Global Security Program Director for M  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 26 / 2025  
**Transaction ID : 2025113018223-25**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Vessal, Moshe A, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Global Security Program Director for M  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 15 / 2025  
**Transaction ID : 2025121518253-42**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Vessal, Moshe A, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CSL Behring L.L.C. Occupation (for Individual) Global Security Program Director for M  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00

Date of Receipt 12 / 31 / 2025  
**Transaction ID : 2025123118193-13**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 93 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Vollet, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Sr Regional Sales Manager-Coagulation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2025  
**Transaction ID : 2025071518913-26**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**B. Vollet, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Sr Regional Sales Manager-Coagulation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 31 / 2025  
**Transaction ID : 2025073118911-27**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C. Vollet, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Sr Regional Sales Manager-Coagulation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 15 / 2025  
**Transaction ID : 2025081518449-25**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 94 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Vollet, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Sr Regional Sales Manager-Coagulation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.50

Date of Receipt  
 08 / 29 / 2025  
**Transaction ID : 2025083118910-41**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**B. Vollet, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Sr Regional Sales Manager-Coagulation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.50

Date of Receipt  
 09 / 15 / 2025  
**Transaction ID : 2025091518712-4**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

**C. Vollet, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1020 1st Ave  
 City King of Prussia State PA Zip Code 19406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 CSL Behring L.L.C. Sr Regional Sales Manager-Coagulation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 937.50

Date of Receipt  
 09 / 30 / 2025  
**Transaction ID : 20250930181211-24**  
 Amount of Each Receipt this Period 62.50  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.50
<b>TOTAL</b> 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 95 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Vollet, Scott, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2025 <b>Transaction ID : 2025101518910-23</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 62.50		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Sr Regional Sales Manager-Coagulation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 937.50			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Vollet, Scott, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 31 / 2025 <b>Transaction ID : 20251031181011-57</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 62.50		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Sr Regional Sales Manager-Coagulation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 937.50			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Vollet, Scott, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 14 / 2025 <b>Transaction ID : 2025111518219-47</b>		
Mailing Address 1020 1st Ave			Amount of Each Receipt this Period 62.50		
City King of Prussia	State PA	Zip Code 19406	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) CSL Behring L.L.C.		Occupation (for Individual) Sr Regional Sales Manager-Coagulation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 937.50			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.50
<b>TOTAL</b> 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 96 OF 102
	<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)  
**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

**A. Vollet, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Sr Regional Sales Manager-Coagulation
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 937.50

Date of Receipt  
 11 / 26 / 2025  
**Transaction ID : 2025113018223-26**

Amount of Each Receipt this Period  
 62.50

Memo Item

**B. Vollet, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Sr Regional Sales Manager-Coagulation
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 937.50

Date of Receipt  
 12 / 15 / 2025  
**Transaction ID : 2025121518253-40**

Amount of Each Receipt this Period  
 62.50

Memo Item

**C. Vollet, Scott, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1020 1st Ave

City King of Prussia	State PA	Zip Code 19406
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) CSL Behring L.L.C.	Occupation (for Individual) Sr Regional Sales Manager-Coagulation
---	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
 937.50

Date of Receipt  
 12 / 31 / 2025  
**Transaction ID : 2025123118193-8**

Amount of Each Receipt this Period  
 62.50

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.50
<b>TOTAL</b> This Period (last page this line number only).....▶	15579.94

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)

Form for line numbers 21b-30b with checkboxes, where 23 is checked.

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NAME OF COMMITTEE (In Full)

CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)

Full Name (Last, First, Middle Initial)

A. Bill Cassidy For US Senate

Mailing Address PO Box 80505

City Baton Rouge

State LA

Zip Code 70898-0505

Purpose of Disbursement 2026 Primary

011

Candidate Name

Cassidy, Bill, , ,

Category/Type

Office Sought: Senate (checked)

Disbursement For: 2026 Primary (checked)

State: LA District:

Date of Disbursement

Date field showing 09/11/2025

FEC Identification Number

C00543983

Transaction ID : 2355EDE7E8

Amount of Each Disbursement this Period

Amount field showing 3500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Cornyn Victory Committee

Mailing Address PO Box 13026

City Austin

State TX

Zip Code 78711-3026

Purpose of Disbursement 2025 Contribution

011

Candidate Name

Cornyn Victory Committee

Category/Type

Office Sought: Senate (checked)

Disbursement For: 2025 Other (checked)

State: District: Contribution

Date of Disbursement

Date field showing 09/11/2025

FEC Identification Number

C00770180

Transaction ID : 82F4B8EDF5

Amount of Each Disbursement this Period

Amount field showing 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Diana DeGette for Congress

Mailing Address PO Box 61337

City Denver

State CO

Zip Code 80206-8337

Purpose of Disbursement 2026 Primary

011

Candidate Name

DeGette, Diana, , ,

Category/Type

Office Sought: House (checked)

Disbursement For: 2026 Primary (checked)

State: CO District: 01

Date of Disbursement

Date field showing 12/15/2025

FEC Identification Number

C00311639

Transaction ID : F14C4F69BD

Amount of Each Disbursement this Period

Amount field showing 1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)

Subtotal field showing 6000.00

TOTAL This Period (last page this line number only)

Total field

**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"/> 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)

**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name (Last, First, Middle Initial)

**A. Don Davis For Nc**

Mailing Address PO Box 511

City  
Snow Hill

State  
NC

Zip Code  
28580-0511

Purpose of Disbursement  
2026 Primary

011

Candidate Name

Davis, Don, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: NC District: 01

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2025			

FEC Identification Number

C00795211

**Transaction ID : C086DF87F01**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Don Davis For Nc**

Mailing Address PO Box 511

City  
Snow Hill

State  
NC

Zip Code  
28580-0511

Purpose of Disbursement  
2026 General

011

Candidate Name

Davis, Don, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: NC District: 01

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2025			

FEC Identification Number

C00795211

**Transaction ID : 75B090A7578**

Amount of Each Disbursement this Period

500.00
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Dr John Joyce For Congress**

Mailing Address 1002 Logan Blvd  
Ste 114

City  
Altoona

State  
PA

Zip Code  
16602-4067

Purpose of Disbursement  
2026 Primary

011

Candidate Name

Joyce, John, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: PA District: 13

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			04			2025			

FEC Identification Number

C00674259

**Transaction ID : F23DDA1268**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

2500.00
---------

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

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**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"/> 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)

**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name (Last, First, Middle Initial)

**A. Johnson Leadership Fund**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	2	5

Mailing Address C/O 228 S. WASHINGTON ST.  
STE. 115

City ALEXANDRIA State VA Zip Code 22314

FEC Identification Number

**C** C00771246

**Transaction ID : A1D23FD614.**

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement  
2025 Contribution

011  
Category/  
Type

Candidate Name  
Johnson Leadership Fund

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2025  
 Primary  General  
 Other (specify) Contribution

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mike Johnson For Louisiana**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	2	5

Mailing Address C/O 228 S. WASHINGTON ST.  
STE. 115

City ALEXANDRIA State VA Zip Code 22314

FEC Identification Number

**C** C00608695

**Transaction ID : BA359A3089f**

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement  
2026 Primary

011  
Category/  
Type

Candidate Name  
Johnson, Mike, , ,

Office Sought:  House  Senate  President  
State: LA District: 04

Disbursement For: 2026  
 Primary  General  
 Other (specify)

Memo Item

Full Name (Last, First, Middle Initial)

**C. LaHood for Congress**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	2	5

Mailing Address PO Box 10735

City Peoria State IL Zip Code 61612-0735

FEC Identification Number

**C** C00575050

**Transaction ID : 5983DD2CF6**

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement  
2026 Primary

011  
Category/  
Type

Candidate Name  
LaHood, Darin, , ,

Office Sought:  House  Senate  President  
State: IL District: 16

Disbursement For: 2026  
 Primary  General  
 Other (specify)

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

6000.00

# 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"/> 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)

**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name (Last, First, Middle Initial)

**A. Mad 4 Pa PAC**

Mailing Address PO Box 444

City  
Glenside

State  
PA

Zip Code  
19038-0444

Purpose of Disbursement  
2026 Primary

011

Category/  
Type

Candidate Name

Dean Cunnane, Madeleine, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: PA District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			04			2025			

FEC Identification Number

C00670844

**Transaction ID : 228D52DBEE**

Amount of Each Disbursement this Period

1500.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B. Mark Kelly For Senate**

Mailing Address PO Box 33400

City  
Phoenix

State  
AZ

Zip Code  
85067-3400

Purpose of Disbursement  
2028 Primary

011

Category/  
Type

Candidate Name

Kelly, Mark, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2028  
 Primary  General  
 Other (specify)

State: AZ District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2025			

FEC Identification Number

C00696526

**Transaction ID : F38BB543914**

Amount of Each Disbursement this Period

2500.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Robin Kelly For Senate**

Mailing Address PO Box 101199

City  
Chicago

State  
IL

Zip Code  
60610-8913

Purpose of Disbursement  
2026 Primary

011

Category/  
Type

Candidate Name

Kelly, Robin, , ,

Office Sought:  House  
 Senate  
 President

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: IL District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			04			2025			

FEC Identification Number

C00904300

**Transaction ID : 76590B8E42I**

Amount of Each Disbursement this Period

1500.00
---------

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

5500.00
---------

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

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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)

Grid for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)

CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)

Full Name (Last, First, Middle Initial)

A. Scott Peters For Congress

Date of Disbursement

Date field: MM/DD/YYYY = 12/15/2025

Mailing Address PO Box 22074

City: San Diego, State: CA, Zip Code: 92192-2074

FEC Identification Number

FEC ID: C00503110

Purpose of Disbursement: 2026 Primary

Category/Type: 011

Transaction ID: 5058B1D8C2I
Amount of Each Disbursement this Period

Amount field: 1500.00

Candidate Name: Peters, Scott, . .

Office Sought: House, Senate, President. State: CA, District: 50

Disbursement For: 2026. Primary, General, Other (specify)

Memo Item checkbox

Full Name (Last, First, Middle Initial)

B. Team McCormick

Date of Disbursement

Date field: MM/DD/YYYY = 09/11/2025

Mailing Address PO Box 23537

City: Pittsburgh, State: PA, Zip Code: 15222-6537

FEC Identification Number

FEC ID: C00852012

Purpose of Disbursement: 2025 Contribution

Category/Type: 011

Transaction ID: 332ED854690
Amount of Each Disbursement this Period

Amount field: 3500.00

Candidate Name: Team McCormick

Office Sought: House, Senate, President. State: District:

Disbursement For: 2025. Primary, General, Other (specify) Contribution

Memo Item checkbox

Full Name (Last, First, Middle Initial)

C. Dave McCormick For US Senate

Date of Disbursement

Date field: MM/DD/YYYY = 09/11/2025

Mailing Address PO Box 23537

City: Pittsburgh, State: PA, Zip Code: 15222-6537

FEC Identification Number

FEC ID: C00800623

Purpose of Disbursement: Funds allocated from contribution to Team McCormick

Category/Type: 011

Transaction ID: 58862DADB2
Amount of Each Disbursement this Period

Amount field: 1000.00

Candidate Name: McCormick, Dave, . .

Office Sought: House, Senate, President. State: PA, District:

Disbursement For: 2022. Primary, General, Other (specify)

Memo Item checkbox (checked)

SUBTOTAL of Disbursements This Page (optional).....

Subtotal amount field: 5000.00

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

Total amount field

# 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"/> 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)

**CSL BEHRING LLC EMPLOYEES POLITICAL ACTION COMMITTEE (CSL Employees PAC)**

Full Name (Last, First, Middle Initial)

**A. Friends Of Dave McCormick**

Mailing Address PO Box 23537

City  
Pittsburgh

State  
PA

Zip Code  
15222-6537

Purpose of Disbursement

Funds allocated from contribution to Team McCormick

011

Category/  
Type

Candidate Name

McCormick, Dave, , ,

Office Sought:

House  
 Senate  
 President

Disbursement For: 2024

Primary  General  
 Other (specify) ▼

State: PA

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 11 / 2025

FEC Identification Number

C C00851980

Transaction ID : 093BDEFB82

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.00

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

25000.00