

**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 43
	<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)
Boehringer Ingelheim USA Corporation Political Action Committee

Full Name (Last, First, Middle Initial) A. Hallie Amanda Utley		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 Transaction ID : A4F592EA598C64B73996
Mailing Address 1015 Washington Ave Apt 205		Amount of Each Receipt this Period 104.16
City Saint Louis	State MO	Zip Code 63101-1299
FEC ID number of contributing federal political committee. C	Name of Employer Boehringer Ingelheim USA	Occupation AD, Government Affairs and Public Poli
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 729.12	

Full Name (Last, First, Middle Initial) B. Hallie Amanda Utley		Date of Receipt MM / DD / YYYY 04 / 30 / 2015 Transaction ID : AF362BDDCCF66457C9E3
Mailing Address 1015 Washington Ave Apt 205		Amount of Each Receipt this Period 104.16
City Saint Louis	State MO	Zip Code 63101-1299
FEC ID number of contributing federal political committee. C	Name of Employer Boehringer Ingelheim USA	Occupation AD, Government Affairs and Public Poli
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.28	

Full Name (Last, First, Middle Initial) C. Daniel L. Van Horsen		Date of Receipt MM / DD / YYYY 04 / 15 / 2015 Transaction ID : A190B3C95606B4DAB95C
Mailing Address 16688 Hearthside Way		Amount of Each Receipt this Period 27.16
City Lakeville	State MN	Zip Code 55044-4207
FEC ID number of contributing federal political committee. C	Name of Employer Boehringer Ingelheim Pharmaceuticals,	Occupation DISTRICT MANAGER, SPECIALTY SALES
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.83	

SUBTOTAL of Receipts This Page (optional).....▶	235.48
TOTAL This Period (last page this line number only).....▶	