

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

ADDRESS (number and street) One MedImmune Way
 Check if different than previously reported. (ACC)
Gaithersburg MD 20878

2. **FEC IDENTIFICATION NUMBER** C00399725
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 Quarterly 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 (12G)
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 01 01 2011 through 06 30 2011

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 Vanessa Procter

Signature of Treasurer Electronically Filed by Vanessa Procter Date 07 13 2011

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

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="2011"/>		20504.63
(b) Cash on Hand at Beginning of Reporting Period	20504.63	
(c) Total Receipts (from Line 19)	42923.00	42923.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	63427.63	63427.63
7. Total Disbursements (from Line 31)	21500.00	21500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	41927.63	41927.63
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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)	20259.00	20259.00
(ii) Unitemized	22664.00	22664.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	42923.00	42923.00
(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)	42923.00	42923.00
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 Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	42923.00	42923.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	42923.00	42923.00

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	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.....	19750.00	19750.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	1750.00	1750.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	21500.00	21500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21500.00	21500.00

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	42923.00	42923.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42923.00	42923.00
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 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Jason T. Adair	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011042765237-32
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation DIRECTOR BUSINESS DEVELOPMENT - SUP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

B.	Full Name (Last, First, Middle Initial) Jason T. Adair	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011051117248-31
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation DIRECTOR BUSINESS DEVELOPMENT - SUP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) Jason T. Adair	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011052565235-30
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation DIRECTOR BUSINESS DEVELOPMENT - SUP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Jason T. Adair		Date of Receipt MM / DD / YYYY 06 / 10 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011060865250-31		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation DIRECTOR BUSINESS DEVELOPMENT - SUP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00			

B.	Full Name (Last, First, Middle Initial) Jason T. Adair		Date of Receipt MM / DD / YYYY 06 / 24 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011062265250-27		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation DIRECTOR BUSINESS DEVELOPMENT - SUP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00			

C.	Full Name (Last, First, Middle Initial) Jody A. Aud		Date of Receipt MM / DD / YYYY 05 / 27 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011052565235-134		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation ASSOCIATE DIRECTOR INTERNAL COMMUNICA			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00			

SUBTOTAL of Receipts This Page (optional)	▶	70.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 137		
	<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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Jody A. Aud		Date of Receipt MM / DD / YYYY 06 / 10 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011060865250-134		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Occupation ASSOCIATE DIRECTOR INTERNAL COMMUNICA		
	Name of Employer MedImmune LLC		Aggregate Year-to-Date 260.00		

B.	Full Name (Last, First, Middle Initial) Jody A. Aud		Date of Receipt MM / DD / YYYY 06 / 24 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011062265250-126		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Occupation ASSOCIATE DIRECTOR INTERNAL COMMUNICA		
	Name of Employer MedImmune LLC		Aggregate Year-to-Date 260.00		

C.	Full Name (Last, First, Middle Initial) Maryellen Enos Baker		Date of Receipt MM / DD / YYYY 05 / 27 / 2011		
	Mailing Address 1617 Wakeman Avenue		Transaction ID: 2011052565235-69		
	City Wheaton	State IL	Zip Code 60187	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Occupation ADVOCACY DEVELOPMENT MANAGER		
	Name of Employer MedImmune Biologics Inc.		Aggregate Year-to-Date 260.00		

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Maryellen Enos Baker		Date of Receipt	
	Mailing Address 1617 Wakeman Avenue		M M / D D / Y Y Y Y 06 / 10 / 2011	
	City	State	Zip Code	Transaction ID: 2011060865250-70
	Wheaton	IL	60187	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		20.00	
Name of Employer MedImmune Biologics Inc.		Occupation ADVOCACY DEVELOPMENT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00		

B.	Full Name (Last, First, Middle Initial) Maryellen Enos Baker		Date of Receipt	
	Mailing Address 1617 Wakeman Avenue		M M / D D / Y Y Y Y 06 / 24 / 2011	
	City	State	Zip Code	Transaction ID: 2011062265250-62
	Wheaton	IL	60187	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		20.00	
Name of Employer MedImmune Biologics Inc.		Occupation ADVOCACY DEVELOPMENT MANAGER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00		

C.	Full Name (Last, First, Middle Initial) Joel A. Batten		Date of Receipt	
	Mailing Address 1809 1st Street North #501		M M / D D / Y Y Y Y 04 / 01 / 2011	
	City	State	Zip Code	Transaction ID: 2011033065235-98
	Jacksonville Beach	FL	32250	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer MedImmune Biologics Inc.		Occupation MANAGER GOVERNMENT AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00		

SUBTOTAL of Receipts This Page (optional)	▶	70.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial) Joel A. Batten		Date of Receipt MM / DD / YYYY 04 / 15 / 2011
Mailing Address 1809 1st Street North #501		Transaction ID: 2011041365237-97
City Jacksonville Beach	State Zip Code FL 32250	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer MedImmune Biologics Inc.	Occupation MANAGER GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

B.

Full Name (Last, First, Middle Initial) Joel A. Batten		Date of Receipt MM / DD / YYYY 04 / 29 / 2011
Mailing Address 1809 1st Street North #501		Transaction ID: 2011042765237-96
City Jacksonville Beach	State Zip Code FL 32250	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer MedImmune Biologics Inc.	Occupation MANAGER GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

C.

Full Name (Last, First, Middle Initial) Joel A. Batten		Date of Receipt MM / DD / YYYY 05 / 13 / 2011
Mailing Address 1809 1st Street North #501		Transaction ID: 2011051117248-95
City Jacksonville Beach	State Zip Code FL 32250	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer MedImmune Biologics Inc.	Occupation MANAGER GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Joel A. Batten		Date of Receipt	
	Mailing Address 1809 1st Street North #501		M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011052565235-94
	Jacksonville Beach	FL	32250	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer MedImmune Biologics Inc.		Occupation MANAGER GOVERNMENT AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00		

B.	Full Name (Last, First, Middle Initial) Joel A. Batten		Date of Receipt	
	Mailing Address 1809 1st Street North #501		M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011060865250-95
	Jacksonville Beach	FL	32250	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer MedImmune Biologics Inc.		Occupation MANAGER GOVERNMENT AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00		

C.	Full Name (Last, First, Middle Initial) Joel A. Batten		Date of Receipt	
	Mailing Address 1809 1st Street North #501		M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011062265250-87
	Jacksonville Beach	FL	32250	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		30.00	
Name of Employer MedImmune Biologics Inc.		Occupation MANAGER GOVERNMENT AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00		

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 137
	<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)
 MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) William C. Bertrand	Date of Receipt MM / DD / YYYY 01 / 21 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011011914249-27
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT GC & CCO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1950.00	

B.	Full Name (Last, First, Middle Initial) William C. Bertrand	Date of Receipt MM / DD / YYYY 02 / 04 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011020265235-27
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT GC & CCO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1950.00	

C.	Full Name (Last, First, Middle Initial) William C. Bertrand	Date of Receipt MM / DD / YYYY 02 / 18 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011021665235-27
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT GC & CCO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1950.00	

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 13 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial)
William C. Bertrand

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT GC & CCO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 03 / 04 / 2011
Transaction ID: 2011030294822-27
 Amount of Each Receipt this Period 150.00

B. Full Name (Last, First, Middle Initial)
William C. Bertrand

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT GC & CCO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 03 / 18 / 2011
Transaction ID: 2011031695552-27
 Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
William C. Bertrand

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT GC & CCO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 04 / 01 / 2011
Transaction ID: 2011033065235-27
 Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional) ► 450.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) William C. Bertrand		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011041365237-27
		Amount of Each Receipt this Period	<input type="text" value="150.00"/>
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT GC & CCO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1950.00"/>

B.	Full Name (Last, First, Middle Initial) William C. Bertrand		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011042765237-27
		Amount of Each Receipt this Period	<input type="text" value="150.00"/>
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT GC & CCO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1950.00"/>

C.	Full Name (Last, First, Middle Initial) William C. Bertrand		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011051117248-27
		Amount of Each Receipt this Period	<input type="text" value="150.00"/>
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT GC & CCO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1950.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) William C. Bertrand		Date of Receipt																					
	Mailing Address One MedImmune Way		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	7		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		2	7		2	0	1	1														
	City State Zip Code Gaithersburg MD 20878		Transaction ID: 2011052565235-26																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00																						
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT GC & CCO																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1950.00																						

B.	Full Name (Last, First, Middle Initial) William C. Bertrand		Date of Receipt																					
	Mailing Address One MedImmune Way		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		1	0		2	0	1	1														
	City State Zip Code Gaithersburg MD 20878		Transaction ID: 2011060865250-27																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00																						
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT GC & CCO																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1950.00																						

C.	Full Name (Last, First, Middle Initial) William C. Bertrand		Date of Receipt																					
	Mailing Address One MedImmune Way		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		2	4		2	0	1	1														
	City State Zip Code Gaithersburg MD 20878		Transaction ID: 2011062265250-23																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00																						
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT GC & CCO																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1950.00																						

SUBTOTAL of Receipts This Page (optional)	▶	450.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) David Kemp Boyd		Date of Receipt
	Mailing Address 3890 Campus Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 29 / 2011
	City	State	Zip Code
	Thousand Oaks	CA	91360
	FEC ID number of contributing federal political committee.		Transaction ID: 2011042765237-41
		Amount of Each Receipt this Period	<input type="text"/> 25.00
Name of Employer MedImmune Biologics Inc.		Occupation REGIONAL BUSINESS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 325.00

B.	Full Name (Last, First, Middle Initial) David Kemp Boyd		Date of Receipt
	Mailing Address 3890 Campus Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 13 / 2011
	City	State	Zip Code
	Thousand Oaks	CA	91360
	FEC ID number of contributing federal political committee.		Transaction ID: 2011051117248-40
		Amount of Each Receipt this Period	<input type="text"/> 25.00
Name of Employer MedImmune Biologics Inc.		Occupation REGIONAL BUSINESS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 325.00

C.	Full Name (Last, First, Middle Initial) David Kemp Boyd		Date of Receipt
	Mailing Address 3890 Campus Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 27 / 2011
	City	State	Zip Code
	Thousand Oaks	CA	91360
	FEC ID number of contributing federal political committee.		Transaction ID: 2011052565235-39
		Amount of Each Receipt this Period	<input type="text"/> 25.00
Name of Employer MedImmune Biologics Inc.		Occupation REGIONAL BUSINESS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 325.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 75.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) David Kemp Boyd	Date of Receipt MM / DD / YYYY 06 / 10 / 2011
	Mailing Address 3890 Campus Drive	Transaction ID: 2011060865250-40
	City State Zip Code Thousand Oaks CA 91360	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. REGIONAL BUSINESS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

B.	Full Name (Last, First, Middle Initial) David Kemp Boyd	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address 3890 Campus Drive	Transaction ID: 2011062265250-36
	City State Zip Code Thousand Oaks CA 91360	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. REGIONAL BUSINESS DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) John J. Brack	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011042765237-78
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC VICE PRESIDENT HUMAN RESOURCES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) John J. Brack		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 13 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011051117248-77
Name of Employer MedImmune LLC		Occupation VICE PRESIDENT HUMAN RESOURCES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 325.00	<input type="text"/> 25.00

B.	Full Name (Last, First, Middle Initial) John J. Brack		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 27 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011052565235-76
Name of Employer MedImmune LLC		Occupation VICE PRESIDENT HUMAN RESOURCES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 325.00	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) John J. Brack		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 10 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011060865250-77
Name of Employer MedImmune LLC		Occupation VICE PRESIDENT HUMAN RESOURCES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 325.00	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 75.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) John J. Brack		Date of Receipt MM / DD / YYYY 06 / 24 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011062265250-69		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation VICE PRESIDENT HUMAN RESOURCES			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00			

B.	Full Name (Last, First, Middle Initial) Douglas V. Brady		Date of Receipt MM / DD / YYYY 04 / 29 / 2011		
	Mailing Address 12 Fawnwood Road		Transaction ID: 2011042765237-83		
	City Sandy Hook	State CT	Zip Code 06482	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation AREA BUSINESS MANAGER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00			

C.	Full Name (Last, First, Middle Initial) Douglas V. Brady		Date of Receipt MM / DD / YYYY 05 / 13 / 2011		
	Mailing Address 12 Fawnwood Road		Transaction ID: 2011051117248-82		
	City Sandy Hook	State CT	Zip Code 06482	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation AREA BUSINESS MANAGER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00			

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 20 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial)
Douglas V. Brady

Mailing Address 12 Fawnwood Road

City State Zip Code
Sandy Hook CT 06482

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

Name of Employer Occupation
MedImmune Biologics Inc. AREA BUSINESS MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
05 / 27 / 2011

Transaction ID: 2011052565235-81

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Douglas V. Brady

Mailing Address 12 Fawnwood Road

City State Zip Code
Sandy Hook CT 06482

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

Name of Employer Occupation
MedImmune Biologics Inc. AREA BUSINESS MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
06 / 10 / 2011

Transaction ID: 2011060865250-82

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Douglas V. Brady

Mailing Address 12 Fawnwood Road

City State Zip Code
Sandy Hook CT 06482

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

Name of Employer Occupation
MedImmune Biologics Inc. AREA BUSINESS MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
06 / 24 / 2011

Transaction ID: 2011062265250-74

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **75.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Christopher M. Brooke		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y Y 03 / 04 / 2011	
	City	State	Zip Code	Transaction ID: 2011030294822-129
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT GLOBAL MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

B.	Full Name (Last, First, Middle Initial) Christopher M. Brooke		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y Y 03 / 18 / 2011	
	City	State	Zip Code	Transaction ID: 2011031695552-128
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT GLOBAL MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

C.	Full Name (Last, First, Middle Initial) Christopher M. Brooke		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y Y 04 / 01 / 2011	
	City	State	Zip Code	Transaction ID: 2011033065235-128
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT GLOBAL MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 137
	<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)
 MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Christopher M. Brooke	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011041365237-125
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. VICE PRESIDENT GLOBAL MARKETNG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

B.	Full Name (Last, First, Middle Initial) Christopher M. Brooke	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011042765237-124
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. VICE PRESIDENT GLOBAL MARKETNG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

C.	Full Name (Last, First, Middle Initial) Christopher M. Brooke	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011051117248-123
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. VICE PRESIDENT GLOBAL MARKETNG	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Christopher M. Brooke		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y Y 0 5 / 2 7 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011052565235-122
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT GLOBAL MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

B.	Full Name (Last, First, Middle Initial) Christopher M. Brooke		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011060865250-122
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT GLOBAL MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

C.	Full Name (Last, First, Middle Initial) Christopher M. Brooke		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y Y 0 6 / 2 4 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011062265250-114
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT GLOBAL MARKETING		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 137

(check only one)

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

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NAME OF COMMITTEE (In Full)

MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial)

Elizabeth Brunsvold

Mailing Address 340 West Old Town Court

City State Zip Code
Chicago IL 60610

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

Name of Employer Occupation
MedImmune Biologics Inc. MANAGER GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2011

Transaction ID: 2011030294822-133

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Elizabeth Brunsvold

Mailing Address 340 West Old Town Court

City State Zip Code
Chicago IL 60610

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

Name of Employer Occupation
MedImmune Biologics Inc. MANAGER GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 18 / 2011

Transaction ID: 2011031695552-132

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Elizabeth Brunsvold

Mailing Address 340 West Old Town Court

City State Zip Code
Chicago IL 60610

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

Name of Employer Occupation
MedImmune Biologics Inc. MANAGER GOVERNMENT AFFAIRS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 01 / 2011

Transaction ID: 2011033065235-132

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial)
Elizabeth Brunsvold

Mailing Address 340 West Old Town Court

City State Zip Code
Chicago IL 60610

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

Name of Employer MedImmune Biologics Inc. Occupation MANAGER GOVERNMENT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 5 / 2 0 1 1

Transaction ID: 2011041365237-129

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Elizabeth Brunsvold

Mailing Address 340 West Old Town Court

City State Zip Code
Chicago IL 60610

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

Name of Employer MedImmune Biologics Inc. Occupation MANAGER GOVERNMENT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 9 / 2 0 1 1

Transaction ID: 2011042765237-128

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Elizabeth Brunsvold

Mailing Address 340 West Old Town Court

City State Zip Code
Chicago IL 60610

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

Name of Employer MedImmune Biologics Inc. Occupation MANAGER GOVERNMENT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 3 / 2 0 1 1

Transaction ID: 2011051117248-127

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **150.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Elizabeth Brunsvold		Date of Receipt	
	Mailing Address 340 West Old Town Court		M M / D D / Y Y Y Y 05 / 27 / 2011	
	City	State	Zip Code	Transaction ID: 2011052565235-126
	Chicago	IL	60610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune Biologics Inc.		Occupation MANAGER GOVERNMENT AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

B.	Full Name (Last, First, Middle Initial) Elizabeth Brunsvold		Date of Receipt	
	Mailing Address 340 West Old Town Court		M M / D D / Y Y Y Y 06 / 10 / 2011	
	City	State	Zip Code	Transaction ID: 2011060865250-126
	Chicago	IL	60610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune Biologics Inc.		Occupation MANAGER GOVERNMENT AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

C.	Full Name (Last, First, Middle Initial) Elizabeth Brunsvold		Date of Receipt	
	Mailing Address 340 West Old Town Court		M M / D D / Y Y Y Y 06 / 24 / 2011	
	City	State	Zip Code	Transaction ID: 2011062265250-118
	Chicago	IL	60610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune Biologics Inc.		Occupation MANAGER GOVERNMENT AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Glenn N. Byrd	Date of Receipt MM / DD / YYYY 03 / 04 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011030294822-124
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR REGULATORY AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

B.	Full Name (Last, First, Middle Initial) Glenn N. Byrd	Date of Receipt MM / DD / YYYY 03 / 18 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011031695552-123
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR REGULATORY AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

C.	Full Name (Last, First, Middle Initial) Glenn N. Byrd	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011033065235-123
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR REGULATORY AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial) Glenn N. Byrd		Date of Receipt MM / DD / YYYY 04 / 15 / 2011
Mailing Address One MedImmune Way		Transaction ID: 2011041365237-120
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MedImmune LLC	Occupation SENIOR DIRECTOR REGULATORY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

B.

Full Name (Last, First, Middle Initial) Glenn N. Byrd		Date of Receipt MM / DD / YYYY 04 / 29 / 2011
Mailing Address One MedImmune Way		Transaction ID: 2011042765237-119
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MedImmune LLC	Occupation SENIOR DIRECTOR REGULATORY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

C.

Full Name (Last, First, Middle Initial) Glenn N. Byrd		Date of Receipt MM / DD / YYYY 05 / 13 / 2011
Mailing Address One MedImmune Way		Transaction ID: 2011051117248-118
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MedImmune LLC	Occupation SENIOR DIRECTOR REGULATORY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Glenn N. Byrd	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011052565235-117
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC SENIOR DIRECTOR REGULATORY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

B.	Full Name (Last, First, Middle Initial) Glenn N. Byrd	Date of Receipt MM / DD / YYYY 06 / 10 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011060865250-117
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC SENIOR DIRECTOR REGULATORY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

C.	Full Name (Last, First, Middle Initial) Glenn N. Byrd	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011062265250-109
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC SENIOR DIRECTOR REGULATORY AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Brett A. Clark		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR GXP SOURCING	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="390.00"/>
		<input type="text" value="390.00"/>	<input type="text" value="30.00"/>

B.	Full Name (Last, First, Middle Initial) Brett A. Clark		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR GXP SOURCING	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="390.00"/>
		<input type="text" value="390.00"/>	<input type="text" value="30.00"/>

C.	Full Name (Last, First, Middle Initial) Brett A. Clark		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR GXP SOURCING	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="390.00"/>
		<input type="text" value="390.00"/>	<input type="text" value="30.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="90.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Brett A. Clark	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011051117248-132
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR GXP SOURCING Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

B.	Full Name (Last, First, Middle Initial) Brett A. Clark	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011052565235-131
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR GXP SOURCING Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

C.	Full Name (Last, First, Middle Initial) Brett A. Clark	Date of Receipt MM / DD / YYYY 06 / 10 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011060865250-131
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR GXP SOURCING Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00	

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Brett A. Clark	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011062265250-123
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC SENIOR DIRECTOR GXP SOURCING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

B.	Full Name (Last, First, Middle Initial) Salvatore Constantino	Date of Receipt MM / DD / YYYY 03 / 04 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011030294822-115
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC DIRECTOR INFECTIOUS DISEASE PR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

C.	Full Name (Last, First, Middle Initial) Salvatore Constantino	Date of Receipt MM / DD / YYYY 03 / 18 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011031695552-115
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC DIRECTOR INFECTIOUS DISEASE PR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	▶	130.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial) Salvatore Constantino		Date of Receipt MM / DD / YYYY 04 / 01 / 2011
Mailing Address One MedImmune Way		Transaction ID: 2011033065235-115
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MedImmune LLC	Occupation DIRECTOR INFECTIOUS DISEASE PR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

B.

Full Name (Last, First, Middle Initial) Salvatore Constantino		Date of Receipt MM / DD / YYYY 04 / 15 / 2011
Mailing Address One MedImmune Way		Transaction ID: 2011041365237-113
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MedImmune LLC	Occupation DIRECTOR INFECTIOUS DISEASE PR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

C.

Full Name (Last, First, Middle Initial) Salvatore Constantino		Date of Receipt MM / DD / YYYY 04 / 29 / 2011
Mailing Address One MedImmune Way		Transaction ID: 2011042765237-112
City Gaithersburg	State MD	Zip Code 20878
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MedImmune LLC	Occupation DIRECTOR INFECTIOUS DISEASE PR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Salvatore Constantino		Date of Receipt MM / DD / YYYY 05 / 13 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011051117248-111		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation DIRECTOR INFECTIOUS DISEASE PR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00			

B.	Full Name (Last, First, Middle Initial) Salvatore Constantino		Date of Receipt MM / DD / YYYY 05 / 27 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011052565235-110		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation DIRECTOR INFECTIOUS DISEASE PR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00			

C.	Full Name (Last, First, Middle Initial) Salvatore Constantino		Date of Receipt MM / DD / YYYY 06 / 10 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011060865250-110		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation DIRECTOR INFECTIOUS DISEASE PR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00			

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial)
Salvatore Constantino

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation DIRECTOR INFECTIOUS DISEASE PR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 24 / 2011

Transaction ID: 2011062265250-102

Amount of Each Receipt this Period 50.00

B.

Full Name (Last, First, Middle Initial)
Lisa R. Davis

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation VICE PRESIDENT CORPORATE AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 02 / 04 / 2011

Transaction ID: 2011020265235-144

Amount of Each Receipt this Period 80.00

C.

Full Name (Last, First, Middle Initial)
Lisa R. Davis

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation VICE PRESIDENT CORPORATE AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1040.00

Date of Receipt 02 / 18 / 2011

Transaction ID: 2011021665235-144

Amount of Each Receipt this Period 80.00

SUBTOTAL of Receipts This Page (optional) ► 210.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Lisa R. Davis		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011030294822-144
		Amount of Each Receipt this Period	
		<input type="text" value="80.00"/>	
Name of Employer MedImmune LLC		Occupation VICE PRESIDENT CORPORATE AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1040.00"/>	

B.	Full Name (Last, First, Middle Initial) Lisa R. Davis		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011031695552-142
		Amount of Each Receipt this Period	
		<input type="text" value="80.00"/>	
Name of Employer MedImmune LLC		Occupation VICE PRESIDENT CORPORATE AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1040.00"/>	

C.	Full Name (Last, First, Middle Initial) Lisa R. Davis		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011033065235-142
		Amount of Each Receipt this Period	
		<input type="text" value="80.00"/>	
Name of Employer MedImmune LLC		Occupation VICE PRESIDENT CORPORATE AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1040.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="240.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Lisa R. Davis		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011041365237-139
Name of Employer MedImmune LLC		Occupation VICE PRESIDENT CORPORATE AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1040.00"/>	<input type="text" value="80.00"/>

B.	Full Name (Last, First, Middle Initial) Lisa R. Davis		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011042765237-138
Name of Employer MedImmune LLC		Occupation VICE PRESIDENT CORPORATE AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1040.00"/>	<input type="text" value="80.00"/>

C.	Full Name (Last, First, Middle Initial) Lisa R. Davis		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011051117248-137
Name of Employer MedImmune LLC		Occupation VICE PRESIDENT CORPORATE AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1040.00"/>	<input type="text" value="80.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="240.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Lisa R. Davis		Date of Receipt MM / DD / YYYY 05 / 27 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011052565235-136		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 80.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation VICE PRESIDENT CORPORATE AFFAIRS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1040.00			

B.	Full Name (Last, First, Middle Initial) Lisa R. Davis		Date of Receipt MM / DD / YYYY 06 / 10 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011060865250-136		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 80.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation VICE PRESIDENT CORPORATE AFFAIRS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1040.00			

C.	Full Name (Last, First, Middle Initial) Lisa R. Davis		Date of Receipt MM / DD / YYYY 06 / 24 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011062265250-128		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 80.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation VICE PRESIDENT CORPORATE AFFAIRS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1040.00			

SUBTOTAL of Receipts This Page (optional)	▶	240.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Anthony M. DiOrio		Date of Receipt
	Mailing Address 18 Fairfax Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 29 / 2011
	City	State	Zip Code
	Livingston	NJ	07039
	FEC ID number of contributing federal political committee.		Transaction ID: 2011042765237-30
Name of Employer MedImmune Biologics Inc.		Occupation AREA BUSINESS MANAGER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	<input type="text"/> 25.00

B.	Full Name (Last, First, Middle Initial) Diana L. Docktor		Date of Receipt
	Mailing Address 2563 South Milwaukee Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 27 / 2011
	City	State	Zip Code
	Denver	CO	80210
	FEC ID number of contributing federal political committee.		Transaction ID: 2011052565235-14
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR BIOTECH SALES SPECIALIST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 20.00

C.	Full Name (Last, First, Middle Initial) Diana L. Docktor		Date of Receipt
	Mailing Address 2563 South Milwaukee Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 10 / 2011
	City	State	Zip Code
	Denver	CO	80210
	FEC ID number of contributing federal political committee.		Transaction ID: 2011060865250-15
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR BIOTECH SALES SPECIALIST	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text"/> 20.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 65.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Diana L. Docktor	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address 2563 South Milwaukee Street	Transaction ID: 2011062265250-12
	City State Zip Code Denver CO 80210	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. SENIOR BIOTECH SALES SPECIALIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Matthew M. Donley	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011042765237-16
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC EXECUTIVE VICE PRESIDENT HUMAN RESOURC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) Matthew M. Donley	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011051117248-16
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC EXECUTIVE VICE PRESIDENT HUMAN RESOURC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	70.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Matthew M. Donley	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011052565235-15
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC EXECUTIVE VICE PRESIDENT HUMAN RESOURC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

B.	Full Name (Last, First, Middle Initial) Matthew M. Donley	Date of Receipt MM / DD / YYYY 06 / 10 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011060865250-16
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC EXECUTIVE VICE PRESIDENT HUMAN RESOURC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) Matthew M. Donley	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011062265250-13
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC EXECUTIVE VICE PRESIDENT HUMAN RESOURC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Stephanie Lynn Duatschek		Date of Receipt MM / DD / YYYY 02 / 04 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011020265235-43		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation VICE PRESIDENT COMMERCIAL OPERATIONS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 975.00			

B.	Full Name (Last, First, Middle Initial) Stephanie Lynn Duatschek		Date of Receipt MM / DD / YYYY 02 / 18 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011021665235-43		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation VICE PRESIDENT COMMERCIAL OPERATIONS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 975.00			

C.	Full Name (Last, First, Middle Initial) Stephanie Lynn Duatschek		Date of Receipt MM / DD / YYYY 03 / 04 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011030294822-43		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation VICE PRESIDENT COMMERCIAL OPERATIONS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 975.00			

SUBTOTAL of Receipts This Page (optional)	▶	225.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 / 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial)
Stephanie Lynn Duatschek

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune Biologics Inc. Occupation VICE PRESIDENT COMMERCIAL OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt 03 / 18 / 2011

Transaction ID: 2011031695552-43

Amount of Each Receipt this Period 75.00

B. Full Name (Last, First, Middle Initial)
Stephanie Lynn Duatschek

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune Biologics Inc. Occupation VICE PRESIDENT COMMERCIAL OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt 04 / 01 / 2011

Transaction ID: 2011033065235-43

Amount of Each Receipt this Period 75.00

C. Full Name (Last, First, Middle Initial)
Stephanie Lynn Duatschek

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune Biologics Inc. Occupation VICE PRESIDENT COMMERCIAL OPERATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt 04 / 15 / 2011

Transaction ID: 2011041365237-43

Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional) ► 225.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Stephanie Lynn Duatschek	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011042765237-42
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. VICE PRESIDENT COMMERCIAL OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

B.	Full Name (Last, First, Middle Initial) Stephanie Lynn Duatschek	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011051117248-41
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. VICE PRESIDENT COMMERCIAL OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

C.	Full Name (Last, First, Middle Initial) Stephanie Lynn Duatschek	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011052565235-40
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. VICE PRESIDENT COMMERCIAL OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

SUBTOTAL of Receipts This Page (optional)	▶	225.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Stephanie Lynn Duatschek	Date of Receipt MM / DD / YYYY 06 / 10 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011060865250-41
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune Biologics Inc. Occupation VICE PRESIDENT COMMERCIAL OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

B.	Full Name (Last, First, Middle Initial) Stephanie Lynn Duatschek	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011062265250-37
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune Biologics Inc. Occupation VICE PRESIDENT COMMERCIAL OPERATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 975.00	

C.	Full Name (Last, First, Middle Initial) Courtney McKinnon Elliott	Date of Receipt MM / DD / YYYY 03 / 18 / 2011
	Mailing Address 271 Yachting Road	Transaction ID: 2011031695552-52
	City Lexington State SC Zip Code 29072	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune Biologics Inc. Occupation DIRECTOR STATE GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

SUBTOTAL of Receipts This Page (optional)	▶	190.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Courtney McKinnon Elliott		Date of Receipt
	Mailing Address 271 Yachting Road		<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Lexington	SC	29072
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR STATE GOVERNMENT AFFAIRS	Transaction ID: 2011033065235-52
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="520.00"/>	<input type="text" value="40.00"/>

B.	Full Name (Last, First, Middle Initial) Courtney McKinnon Elliott		Date of Receipt
	Mailing Address 271 Yachting Road		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Lexington	SC	29072
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR STATE GOVERNMENT AFFAIRS	Transaction ID: 2011041365237-52
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="520.00"/>	<input type="text" value="40.00"/>

C.	Full Name (Last, First, Middle Initial) Courtney McKinnon Elliott		Date of Receipt
	Mailing Address 271 Yachting Road		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Lexington	SC	29072
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR STATE GOVERNMENT AFFAIRS	Transaction ID: 2011042765237-51
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="520.00"/>	<input type="text" value="40.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="120.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial) Courtney McKinnon Elliott		Date of Receipt MM / DD / YYYY 05 / 13 / 2011
Mailing Address 271 Yachting Road		Transaction ID: 2011051117248-50
City Lexington	State Zip Code SC 29072	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer MedImmune Biologics Inc.	Occupation DIRECTOR STATE GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

B.

Full Name (Last, First, Middle Initial) Courtney McKinnon Elliott		Date of Receipt MM / DD / YYYY 05 / 27 / 2011
Mailing Address 271 Yachting Road		Transaction ID: 2011052565235-49
City Lexington	State Zip Code SC 29072	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer MedImmune Biologics Inc.	Occupation DIRECTOR STATE GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

C.

Full Name (Last, First, Middle Initial) Courtney McKinnon Elliott		Date of Receipt MM / DD / YYYY 06 / 10 / 2011
Mailing Address 271 Yachting Road		Transaction ID: 2011060865250-50
City Lexington	State Zip Code SC 29072	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer MedImmune Biologics Inc.	Occupation DIRECTOR STATE GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00	

SUBTOTAL of Receipts This Page (optional)	120.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Courtney McKinnon Elliott		Date of Receipt
	Mailing Address 271 Yachting Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 24 / 2011
	City	State	Zip Code
	Lexington	SC	29072
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011062265250-43
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR STATE GOVERNMENT AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00	40.00

B.	Full Name (Last, First, Middle Initial) Kenneth M. Ewan		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 18 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011031695552-126
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR ENGINEERING TECH SERV	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00	40.00

C.	Full Name (Last, First, Middle Initial) Kenneth M. Ewan		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 01 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011033065235-126
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR ENGINEERING TECH SERV	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00	40.00

SUBTOTAL of Receipts This Page (optional)	120.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 137		
	<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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Kenneth M. Ewan		Date of Receipt MM / DD / YYYY 04 / 15 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011041365237-123		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation SENIOR DIRECTOR ENGINEERING TECH SERV			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00			

B.	Full Name (Last, First, Middle Initial) Kenneth M. Ewan		Date of Receipt MM / DD / YYYY 04 / 29 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011042765237-122		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation SENIOR DIRECTOR ENGINEERING TECH SERV			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00			

C.	Full Name (Last, First, Middle Initial) Kenneth M. Ewan		Date of Receipt MM / DD / YYYY 05 / 13 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011051117248-121		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation SENIOR DIRECTOR ENGINEERING TECH SERV			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00			

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Kenneth M. Ewan		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 27 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011052565235-120
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR ENGINEERING TECH SERV	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 520.00	<input type="text"/> 40.00

B.	Full Name (Last, First, Middle Initial) Kenneth M. Ewan		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 10 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011060865250-120
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR ENGINEERING TECH SERV	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 520.00	<input type="text"/> 40.00

C.	Full Name (Last, First, Middle Initial) Kenneth M. Ewan		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 24 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011062265250-112
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR ENGINEERING TECH SERV	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 520.00	<input type="text"/> 40.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 120.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Julie M. Garner	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address 1023 Covington Street	Transaction ID: 2011052565235-92
	City State Zip Code Baltimore MD 21230	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: MedImmune Biologics Inc. Occupation: MANAGER GOVERNMENT AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Julie M. Garner	Date of Receipt MM / DD / YYYY 06 / 10 / 2011
	Mailing Address 1023 Covington Street	Transaction ID: 2011060865250-93
	City State Zip Code Baltimore MD 21230	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: MedImmune Biologics Inc. Occupation: MANAGER GOVERNMENT AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Julie M. Garner	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address 1023 Covington Street	Transaction ID: 2011062265250-85
	City State Zip Code Baltimore MD 21230	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: MedImmune Biologics Inc. Occupation: MANAGER GOVERNMENT AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 137
(check only one)

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

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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial)
Peter S. Greenleaf

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
MM / DD / YYYY
02 / 04 / 2011

Transaction ID: 2011020265235-102

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Peter S. Greenleaf

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2011

Transaction ID: 2011021665235-102

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Peter S. Greenleaf

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2011

Transaction ID: 2011030294822-102

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 137

(check only one)

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

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NAME OF COMMITTEE (In Full)

MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial)

Peter S. Greenleaf

Mailing Address One MedImmune Way

City State Zip Code
Gaithersburg MD 20878

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

Name of Employer Occupation
MedImmune LLC PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 18 / 2011

Transaction ID: 2011031695552-102

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Peter S. Greenleaf

Mailing Address One MedImmune Way

City State Zip Code
Gaithersburg MD 20878

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

Name of Employer Occupation
MedImmune LLC PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 01 / 2011

Transaction ID: 2011033065235-102

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Peter S. Greenleaf

Mailing Address One MedImmune Way

City State Zip Code
Gaithersburg MD 20878

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

Name of Employer Occupation
MedImmune LLC PRESIDENT

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1300.00

Date of Receipt

M M / D D / Y Y Y Y
04 / 15 / 2011

Transaction ID: 2011041365237-100

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Peter S. Greenleaf	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011042765237-99
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00	

B.	Full Name (Last, First, Middle Initial) Peter S. Greenleaf	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011051117248-98
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00	

C.	Full Name (Last, First, Middle Initial) Peter S. Greenleaf	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011052565235-97
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 / 137
<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Peter S. Greenleaf		Date of Receipt MM / DD / YYYY 06 / 10 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011060865250-98		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation PRESIDENT	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
1300.00

B.	Full Name (Last, First, Middle Initial) Peter S. Greenleaf		Date of Receipt MM / DD / YYYY 06 / 24 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011062265250-90		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation PRESIDENT	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
1300.00

C.	Full Name (Last, First, Middle Initial) Timothy J. Hahn		Date of Receipt MM / DD / YYYY 02 / 04 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011020265235-120		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation VICE PRESIDENT MANUFACTURING	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
400.00

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Timothy J. Hahn	Date of Receipt MM / DD / YYYY 02 / 18 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011021665235-120
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC VICE PRESIDENT MANUFACTURING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Timothy J. Hahn	Date of Receipt MM / DD / YYYY 03 / 04 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011030294822-120
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC VICE PRESIDENT MANUFACTURING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Timothy J. Hahn	Date of Receipt MM / DD / YYYY 03 / 18 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011031695552-120
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC VICE PRESIDENT MANUFACTURING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Timothy J. Hahn	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011033065235-120
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period -200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC VICE PRESIDENT MANUFACTURING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Jason M. Hall	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011042765237-70
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. SENIOR DIRECTOR REVENUE CYCLE MANAGEM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) Jason M. Hall	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011051117248-69
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. SENIOR DIRECTOR REVENUE CYCLE MANAGEM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	▶	-150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 / 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Jason M. Hall		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011052565235-68
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR DIRECTOR REVENUE CYCLE MANAGEM		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00		

B.	Full Name (Last, First, Middle Initial) Jason M. Hall		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011060865250-69
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR DIRECTOR REVENUE CYCLE MANAGEM		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00		

C.	Full Name (Last, First, Middle Initial) Jason M. Hall		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011062265250-61
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR DIRECTOR REVENUE CYCLE MANAGEM		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00		

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Randolph R. Hall		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011020265235-25
		Amount of Each Receipt this Period	<input type="text" value="70.00"/>
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT FIELD AND MSA OPERATIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="910.00"/>	

B.	Full Name (Last, First, Middle Initial) Randolph R. Hall		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="02"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011021665235-25
		Amount of Each Receipt this Period	<input type="text" value="70.00"/>
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT FIELD AND MSA OPERATIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="910.00"/>	

C.	Full Name (Last, First, Middle Initial) Randolph R. Hall		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011030294822-25
		Amount of Each Receipt this Period	<input type="text" value="70.00"/>
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT FIELD AND MSA OPERATIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="910.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="210.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Randolph R. Hall		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 18 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011031695552-25
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT FIELD AND MSA OPERATIO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 910.00	<input type="text"/> 70.00

B.	Full Name (Last, First, Middle Initial) Randolph R. Hall		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 01 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011033065235-25
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT FIELD AND MSA OPERATIO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 910.00	<input type="text"/> 70.00

C.	Full Name (Last, First, Middle Initial) Randolph R. Hall		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 15 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011041365237-25
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT FIELD AND MSA OPERATIO	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 910.00	<input type="text"/> 70.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 210.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Randolph R. Hall		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT FIELD AND MSA OPERATIO	Transaction ID: 2011042765237-25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="910.00"/>	Amount of Each Receipt this Period <input type="text" value="70.00"/>

B.	Full Name (Last, First, Middle Initial) Randolph R. Hall		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT FIELD AND MSA OPERATIO	Transaction ID: 2011051117248-25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="910.00"/>	Amount of Each Receipt this Period <input type="text" value="70.00"/>

C.	Full Name (Last, First, Middle Initial) Randolph R. Hall		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT FIELD AND MSA OPERATIO	Transaction ID: 2011052565235-24
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="910.00"/>	Amount of Each Receipt this Period <input type="text" value="70.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="210.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Randolph R. Hall		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 10 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011060865250-25
		Amount of Each Receipt this Period	
		<input type="text"/> 70.00	
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT FIELD AND MSA OPERATIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 910.00	

B.	Full Name (Last, First, Middle Initial) Randolph R. Hall		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 24 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011062265250-21
		Amount of Each Receipt this Period	
		<input type="text"/> 70.00	
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT FIELD AND MSA OPERATIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 910.00	

C.	Full Name (Last, First, Middle Initial) Amy Hamerton		Date of Receipt
	Mailing Address 152 Dulverton Cir		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 29 / 2011
	City	State	Zip Code
	Folsom	CA	95630
	FEC ID number of contributing federal political committee.		Transaction ID: 2011042765237-117
		Amount of Each Receipt this Period	
		<input type="text"/> 25.00	
Name of Employer MedImmune Biologics Inc.		Occupation MANAGER GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 325.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 165.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Amy Hamerton		Date of Receipt	
	Mailing Address 152 Dulverton Cir		M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011051117248-116
	Folsom	CA	95630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MedImmune Biologics Inc.		Occupation MANAGER GOVERNMENT AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00		

B.	Full Name (Last, First, Middle Initial) Amy Hamerton		Date of Receipt	
	Mailing Address 152 Dulverton Cir		M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011052565235-115
	Folsom	CA	95630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MedImmune Biologics Inc.		Occupation MANAGER GOVERNMENT AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00		

C.	Full Name (Last, First, Middle Initial) Amy Hamerton		Date of Receipt	
	Mailing Address 152 Dulverton Cir		M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011060865250-115
	Folsom	CA	95630	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
Name of Employer MedImmune Biologics Inc.		Occupation MANAGER GOVERNMENT AFFAIRS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00		

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Amy Hamerton		Date of Receipt
	Mailing Address 152 Dulverton Cir		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Folsom	CA	95630
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation MANAGER GOVERNMENT AFFAIRS	Transaction ID: 2011062265250-107
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="325.00"/>	<input type="text" value="25.00"/>

B.	Full Name (Last, First, Middle Initial) Kathleen M. Hampton		Date of Receipt
	Mailing Address 6720 Hammersmith Drive		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Raleigh	NC	27613
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER ADVOCACY DEVELOPMENT	Transaction ID: 2011052565235-123
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="260.00"/>	<input type="text" value="20.00"/>

C.	Full Name (Last, First, Middle Initial) Kathleen M. Hampton		Date of Receipt
	Mailing Address 6720 Hammersmith Drive		<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Raleigh	NC	27613
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER ADVOCACY DEVELOPMENT	Transaction ID: 2011060865250-123
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="260.00"/>	<input type="text" value="20.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="65.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Kathleen M. Hampton	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address 6720 Hammersmith Drive	Transaction ID: 2011062265250-115
	City Raleigh State NC Zip Code 27613	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune Biologics Inc. Occupation SENIOR MANAGER ADVOCACY DEVELOPMENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 260.00	

B.	Full Name (Last, First, Middle Initial) Stephen J. Hastings	Date of Receipt MM / DD / YYYY 03 / 04 / 2011
	Mailing Address 3824 Cedar Springs Road #521	Transaction ID: 2011030294822-142
	City Dallas State TX Zip Code 75219	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune Biologics Inc. Occupation MANAGER GOVERNMENT AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 650.00	

C.	Full Name (Last, First, Middle Initial) Stephen J. Hastings	Date of Receipt MM / DD / YYYY 03 / 18 / 2011
	Mailing Address 3824 Cedar Springs Road #521	Transaction ID: 2011031695552-141
	City Dallas State TX Zip Code 75219	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune Biologics Inc. Occupation MANAGER GOVERNMENT AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 650.00	

SUBTOTAL of Receipts This Page (optional)	120.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Stephen J. Hastings	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 3824 Cedar Springs Road #521	Transaction ID: 2011033065235-141
	City State Zip Code Dallas TX 75219	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: MedImmune Biologics Inc. Occupation: MANAGER GOVERNMENT AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

B.	Full Name (Last, First, Middle Initial) Stephen J. Hastings	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address 3824 Cedar Springs Road #521	Transaction ID: 2011041365237-138
	City State Zip Code Dallas TX 75219	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: MedImmune Biologics Inc. Occupation: MANAGER GOVERNMENT AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

C.	Full Name (Last, First, Middle Initial) Stephen J. Hastings	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address 3824 Cedar Springs Road #521	Transaction ID: 2011042765237-137
	City State Zip Code Dallas TX 75219	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: MedImmune Biologics Inc. Occupation: MANAGER GOVERNMENT AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial) Stephen J. Hastings		Date of Receipt MM / DD / YYYY 05 / 13 / 2011
Mailing Address 3824 Cedar Springs Road #521		Transaction ID: 2011051117248-136
City Dallas	State Zip Code TX 75219	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MedImmune Biologics Inc.	Occupation MANAGER GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

B.

Full Name (Last, First, Middle Initial) Stephen J. Hastings		Date of Receipt MM / DD / YYYY 05 / 27 / 2011
Mailing Address 3824 Cedar Springs Road #521		Transaction ID: 2011052565235-135
City Dallas	State Zip Code TX 75219	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MedImmune Biologics Inc.	Occupation MANAGER GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

C.

Full Name (Last, First, Middle Initial) Stephen J. Hastings		Date of Receipt MM / DD / YYYY 06 / 10 / 2011
Mailing Address 3824 Cedar Springs Road #521		Transaction ID: 2011060865250-135
City Dallas	State Zip Code TX 75219	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MedImmune Biologics Inc.	Occupation MANAGER GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial) Stephen J. Hastings		Date of Receipt MM / DD / YYYY 06 / 24 / 2011
Mailing Address 3824 Cedar Springs Road #521		Transaction ID: 2011062265250-127
City Dallas	State Zip Code TX 75219	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer MedImmune Biologics Inc.	Occupation MANAGER GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

B.

Full Name (Last, First, Middle Initial) Mark G. Hitz		Date of Receipt MM / DD / YYYY 04 / 29 / 2011
Mailing Address 3012 Mahan Court		Transaction ID: 2011042765237-10
City Grapevine	State Zip Code TX 76051	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer MedImmune Biologics Inc.	Occupation NATIONAL SALES DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C.

Full Name (Last, First, Middle Initial) Mark G. Hitz		Date of Receipt MM / DD / YYYY 05 / 13 / 2011
Mailing Address 3012 Mahan Court		Transaction ID: 2011051117248-10
City Grapevine	State Zip Code TX 76051	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer MedImmune Biologics Inc.	Occupation NATIONAL SALES DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Mark G. Hitz		Date of Receipt MM / DD / YYYY 05 / 27 / 2011		
	Mailing Address 3012 Mahan Court		Transaction ID: 2011052565235-9		
	City Grapevine	State TX	Zip Code 76051	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation NATIONAL SALES DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00			

B.	Full Name (Last, First, Middle Initial) Mark G. Hitz		Date of Receipt MM / DD / YYYY 06 / 10 / 2011		
	Mailing Address 3012 Mahan Court		Transaction ID: 2011060865250-10		
	City Grapevine	State TX	Zip Code 76051	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation NATIONAL SALES DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00			

C.	Full Name (Last, First, Middle Initial) Mark G. Hitz		Date of Receipt MM / DD / YYYY 06 / 24 / 2011		
	Mailing Address 3012 Mahan Court		Transaction ID: 2011062265250-7		
	City Grapevine	State TX	Zip Code 76051	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation NATIONAL SALES DIRECTOR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00			

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) John T. Hockmeyer	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011042765237-34
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC SENIOR DIRECTOR SPECIAL PROJECTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

B.	Full Name (Last, First, Middle Initial) John T. Hockmeyer	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011051117248-33
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC SENIOR DIRECTOR SPECIAL PROJECTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) John T. Hockmeyer	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011052565235-32
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC SENIOR DIRECTOR SPECIAL PROJECTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) John T. Hockmeyer	Date of Receipt MM / DD / YYYY 06 / 10 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011060865250-33
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR SPECIAL PROJECTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

B.	Full Name (Last, First, Middle Initial) John T. Hockmeyer	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011062265250-29
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR SPECIAL PROJECTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) Elizabeth S. Huntley	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011052565235-38
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR MANAGER COMMUNITY RELATIONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	70.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Elizabeth S. Huntley	Date of Receipt MM / DD / YYYY 06 / 10 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011060865250-39
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR MANAGER COMMUNITY RELATIONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Elizabeth S. Huntley	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011062265250-35
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR MANAGER COMMUNITY RELATIONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Bahija Jallal	Date of Receipt MM / DD / YYYY 02 / 04 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011020265235-78
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT RESEARCH & D Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	▶	140.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial)
Bahija Jallal

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT RESEARCH & D

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt MM / DD / YYYY
02 / 18 / 2011

Transaction ID: 2011021665235-78

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Bahija Jallal

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT RESEARCH & D

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt MM / DD / YYYY
03 / 04 / 2011

Transaction ID: 2011030294822-78

Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
Bahija Jallal

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT RESEARCH & D

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt MM / DD / YYYY
03 / 18 / 2011

Transaction ID: 2011031695552-78

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 300.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Bahija Jallal	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011033065235-78
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC EXECUTIVE VICE PRESIDENT RESEARCH & D	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

B.	Full Name (Last, First, Middle Initial) Bahija Jallal	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011041365237-78
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC EXECUTIVE VICE PRESIDENT RESEARCH & D	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

C.	Full Name (Last, First, Middle Initial) Bahija Jallal	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011042765237-77
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC EXECUTIVE VICE PRESIDENT RESEARCH & D	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Bahija Jallal		Date of Receipt MM / DD / YYYY 05 / 13 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011051117248-76		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation EXECUTIVE VICE PRESIDENT RESEARCH & D			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00			

B.	Full Name (Last, First, Middle Initial) Bahija Jallal		Date of Receipt MM / DD / YYYY 05 / 27 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011052565235-75		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation EXECUTIVE VICE PRESIDENT RESEARCH & D			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00			

C.	Full Name (Last, First, Middle Initial) Bahija Jallal		Date of Receipt MM / DD / YYYY 06 / 10 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011060865250-76		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune LLC	Occupation EXECUTIVE VICE PRESIDENT RESEARCH & D			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00			

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 76 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial)
Bahija Jallal

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT RESEARCH & D

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 24 / 2011
Transaction ID: 2011062265250-68
 Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Abigail L. Jenkins

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune Biologics Inc. Occupation SENIOR DIRECTOR MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 05 / 27 / 2011
Transaction ID: 2011052565235-100
 Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Abigail L. Jenkins

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune Biologics Inc. Occupation SENIOR DIRECTOR MARKETING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 10 / 2011
Transaction ID: 2011060865250-101
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ► 140.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Abigail L. Jenkins		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011062265250-93
		Amount of Each Receipt this Period	<input type="text" value="20.00"/>
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR DIRECTOR MARKETING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="260.00"/>

B.	Full Name (Last, First, Middle Initial) James E. Kearney		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011052565235-130
		Amount of Each Receipt this Period	<input type="text" value="20.00"/>
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR EHS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="260.00"/>

C.	Full Name (Last, First, Middle Initial) James E. Kearney		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011060865250-130
		Amount of Each Receipt this Period	<input type="text" value="20.00"/>
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR EHS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="260.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial)
James E. Kearney

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR EHS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 06 / 24 / 2011
Transaction ID: 2011062265250-122
 Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Suzanne Kirk

Mailing Address 40905 N CONGRESSIONAL DR.

City ANTHEM State AZ Zip Code 85086

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

Name of Employer MedImmune Biologics Inc. Occupation VACCINE ACCOUNT MANAGER II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 04 / 01 / 2011
Transaction ID: 2011033065235-2
 Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
Suzanne Kirk

Mailing Address 40905 N CONGRESSIONAL DR.

City ANTHEM State AZ Zip Code 85086

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

Name of Employer MedImmune Biologics Inc. Occupation VACCINE ACCOUNT MANAGER II

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt 04 / 15 / 2011
Transaction ID: 2011041365237-2
 Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 80.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial) Suzanne Kirk		Date of Receipt MM / DD / YYYY 04 / 29 / 2011
Mailing Address 40905 N CONGRESSIONAL DR.		Transaction ID: 2011042765237-2
City ANTHEM	State AZ	Zip Code 85086
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer MedImmune Biologics Inc.	Occupation VACCINE ACCOUNT MANAGER II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

B.

Full Name (Last, First, Middle Initial) Suzanne Kirk		Date of Receipt MM / DD / YYYY 05 / 13 / 2011
Mailing Address 40905 N CONGRESSIONAL DR.		Transaction ID: 2011051117248-2
City ANTHEM	State AZ	Zip Code 85086
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer MedImmune Biologics Inc.	Occupation VACCINE ACCOUNT MANAGER II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

C.

Full Name (Last, First, Middle Initial) Suzanne Kirk		Date of Receipt MM / DD / YYYY 06 / 10 / 2011
Mailing Address 40905 N CONGRESSIONAL DR.		Transaction ID: 2011060865250-2
City ANTHEM	State AZ	Zip Code 85086
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer MedImmune Biologics Inc.	Occupation VACCINE ACCOUNT MANAGER II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

SUBTOTAL of Receipts This Page (optional)	▶	90.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Anne Marie Licos		Date of Receipt																					
	Mailing Address 8825 Montagna Dr		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		2	9		2	0	1	1														
	City State Zip Code Las Vegas NV 89134		Transaction ID: 2011042765237-123																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00																						
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR MEDICAL SCIENCES - MGD MKTS																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00																						

B.	Full Name (Last, First, Middle Initial) Anne Marie Licos		Date of Receipt																					
	Mailing Address 8825 Montagna Dr		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	3		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		1	3		2	0	1	1														
	City State Zip Code Las Vegas NV 89134		Transaction ID: 2011051117248-122																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00																						
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR MEDICAL SCIENCES - MGD MKTS																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00																						

C.	Full Name (Last, First, Middle Initial) Anne Marie Licos		Date of Receipt																					
	Mailing Address 8825 Montagna Dr		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	7		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		2	7		2	0	1	1														
	City State Zip Code Las Vegas NV 89134		Transaction ID: 2011052565235-121																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00																						
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR MEDICAL SCIENCES - MGD MKTS																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00																						

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Anne Marie Licos		Date of Receipt
	Mailing Address 8825 Montagna Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 10 / 2011
	City	State	Zip Code
	Las Vegas	NV	89134
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011060865250-121
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR MEDICAL SCIENCES - MGD MKTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 325.00	<input type="text"/> 25.00

B.	Full Name (Last, First, Middle Initial) Anne Marie Licos		Date of Receipt
	Mailing Address 8825 Montagna Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 24 / 2011
	City	State	Zip Code
	Las Vegas	NV	89134
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011062265250-113
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR MEDICAL SCIENCES - MGD MKTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 325.00	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) William E. McMurray		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 29 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011042765237-11
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR FACILITIES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 325.00	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 75.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) William E. McMurray	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011051117248-11
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR FACILITIES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

B.	Full Name (Last, First, Middle Initial) William E. McMurray	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011052565235-10
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR FACILITIES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) William E. McMurray	Date of Receipt MM / DD / YYYY 06 / 10 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011060865250-11
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR FACILITIES Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial)
William E. McMurray

Mailing Address One MedImmune Way

City State Zip Code
Gaithersburg MD 20878

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

Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR FACILITIES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 4 / 2 0 1 1

Transaction ID: 2011062265250-8

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Steve H. Metzger

Mailing Address 4109 Plumwood Drive

City State Zip Code
West Des Moines IA 50265

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

Name of Employer MedImmune Biologics Inc. Occupation EXECUTIVE CLINICAL MARKETING MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 2 7 / 2 0 1 1

Transaction ID: 2011052565235-7

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Steve H. Metzger

Mailing Address 4109 Plumwood Drive

City State Zip Code
West Des Moines IA 50265

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

Name of Employer MedImmune Biologics Inc. Occupation EXECUTIVE CLINICAL MARKETING MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 0 / 2 0 1 1

Transaction ID: 2011060865250-8

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **65.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Michael M. Miller		Date of Receipt
	Mailing Address 10 Telfair Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 29 / 2011
	City	State	Zip Code
	Columbia	SC	29212
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011042765237-7
Name of Employer MedImmune Biologics Inc.		Occupation NATIONAL SALES DIRECTOR VACCINES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	25.00

B.	Full Name (Last, First, Middle Initial) Michael M. Miller		Date of Receipt
	Mailing Address 10 Telfair Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 13 / 2011
	City	State	Zip Code
	Columbia	SC	29212
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011051117248-7
Name of Employer MedImmune Biologics Inc.		Occupation NATIONAL SALES DIRECTOR VACCINES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	25.00

C.	Full Name (Last, First, Middle Initial) Michael M. Miller		Date of Receipt
	Mailing Address 10 Telfair Ct		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 27 / 2011
	City	State	Zip Code
	Columbia	SC	29212
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011052565235-6
Name of Employer MedImmune Biologics Inc.		Occupation NATIONAL SALES DIRECTOR VACCINES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	25.00

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Michael M. Miller	Date of Receipt MM / DD / YYYY 06 / 10 / 2011
	Mailing Address 10 Telfair Ct	Transaction ID: 2011060865250-7
	City State Zip Code Columbia SC 29212	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. NATIONAL SALES DIRECTOR VACCINES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

B.	Full Name (Last, First, Middle Initial) Michael M. Miller	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address 10 Telfair Ct	Transaction ID: 2011062265250-6
	City State Zip Code Columbia SC 29212	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. NATIONAL SALES DIRECTOR VACCINES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) Mark A. Mlynarczyk	Date of Receipt MM / DD / YYYY 03 / 04 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011030294822-30
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. DIRECTOR POLICY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 86 / 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Mark A. Mlynarczyk		Date of Receipt MM / DD / YYYY 03 / 18 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011031695552-30		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation DIRECTOR POLICY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00			

B.	Full Name (Last, First, Middle Initial) Mark A. Mlynarczyk		Date of Receipt MM / DD / YYYY 04 / 01 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011033065235-30		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation DIRECTOR POLICY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00			

C.	Full Name (Last, First, Middle Initial) Mark A. Mlynarczyk		Date of Receipt MM / DD / YYYY 04 / 15 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011041365237-30		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation DIRECTOR POLICY			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00			

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 87 / 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Mark A. Mlynarczyk		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y Y 0 4 / 2 9 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011042765237-29
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR POLICY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

B.	Full Name (Last, First, Middle Initial) Mark A. Mlynarczyk		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y Y 0 5 / 1 3 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011051117248-29
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR POLICY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

C.	Full Name (Last, First, Middle Initial) Mark A. Mlynarczyk		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y Y 0 5 / 2 7 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011052565235-28
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR POLICY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial)
Mark A. Mlynarczyk

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune Biologics Inc. Occupation DIRECTOR POLICY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 10 / 2011

Transaction ID: 2011060865250-29

Amount of Each Receipt this Period 50.00

B.

Full Name (Last, First, Middle Initial)
Mark A. Mlynarczyk

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune Biologics Inc. Occupation DIRECTOR POLICY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 06 / 24 / 2011

Transaction ID: 2011062265250-25

Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
Raken B. Modi

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR CORPORATE STRATEGY-SU

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 03 / 04 / 2011

Transaction ID: 2011030294822-126

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 137		
	<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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Raken B. Modi		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011031695552-125
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR CORPORATE STRATEGY-SU	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="650.00"/>	

B.	Full Name (Last, First, Middle Initial) Raken B. Modi		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011033065235-125
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR CORPORATE STRATEGY-SU	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="650.00"/>	

C.	Full Name (Last, First, Middle Initial) Raken B. Modi		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011041365237-122
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR CORPORATE STRATEGY-SU	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
		<input type="text" value="650.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Raken B. Modi	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011042765237-121
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR CORPORATE STRATEGY-SU Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

B.	Full Name (Last, First, Middle Initial) Raken B. Modi	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011051117248-120
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR CORPORATE STRATEGY-SU Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

C.	Full Name (Last, First, Middle Initial) Raken B. Modi	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011052565235-119
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR CORPORATE STRATEGY-SU Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Raken B. Modi		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 10 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011060865250-119
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR CORPORATE STRATEGY-SU	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 650.00	

B.	Full Name (Last, First, Middle Initial) Raken B. Modi		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 24 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011062265250-111
Name of Employer MedImmune LLC		Occupation SENIOR DIRECTOR CORPORATE STRATEGY-SU	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 650.00	

C.	Full Name (Last, First, Middle Initial) Deborah A. Neivert		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 01 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011033065235-70
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR DIRECTOR GLOBAL STRAT. MKTG.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 33.00
		<input type="text"/> 429.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 133.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 / 137		
	<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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Deborah A. Neivert	Date of Receipt MM / DD / YYYY 04 / 15 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011041365237-70
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 33.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune Biologics Inc. Occupation SENIOR DIRECTOR GLOBAL STRAT. MKTG. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 429.00	

B.	Full Name (Last, First, Middle Initial) Deborah A. Neivert	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011042765237-69
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 33.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune Biologics Inc. Occupation SENIOR DIRECTOR GLOBAL STRAT. MKTG. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 429.00	

C.	Full Name (Last, First, Middle Initial) Deborah A. Neivert	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011051117248-68
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 33.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune Biologics Inc. Occupation SENIOR DIRECTOR GLOBAL STRAT. MKTG. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 429.00	

SUBTOTAL of Receipts This Page (optional)	99.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Deborah A. Neivert	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011052565235-67
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 33.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune Biologics Inc. Occupation SENIOR DIRECTOR GLOBAL STRAT. MKTG. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 429.00	

B.	Full Name (Last, First, Middle Initial) Deborah A. Neivert	Date of Receipt MM / DD / YYYY 06 / 10 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011060865250-68
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 33.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune Biologics Inc. Occupation SENIOR DIRECTOR GLOBAL STRAT. MKTG. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 429.00	

C.	Full Name (Last, First, Middle Initial) Deborah A. Neivert	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011062265250-60
	City Gaithersburg State MD Zip Code 20878	Amount of Each Receipt this Period 33.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune Biologics Inc. Occupation SENIOR DIRECTOR GLOBAL STRAT. MKTG. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 429.00	

SUBTOTAL of Receipts This Page (optional)	99.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Paul E. Nielsen		Date of Receipt MM / DD / YYYY 04 / 29 / 2011		
	Mailing Address 15104 NE 209th Place		Transaction ID: 2011042765237-38		
	City Brush Prairie	State WA	Zip Code 98606	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation SENIOR MANAGER GOVERNMENT AFFAIRS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00			

B.	Full Name (Last, First, Middle Initial) Paul E. Nielsen		Date of Receipt MM / DD / YYYY 05 / 13 / 2011		
	Mailing Address 15104 NE 209th Place		Transaction ID: 2011051117248-37		
	City Brush Prairie	State WA	Zip Code 98606	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation SENIOR MANAGER GOVERNMENT AFFAIRS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00			

C.	Full Name (Last, First, Middle Initial) Paul E. Nielsen		Date of Receipt MM / DD / YYYY 05 / 27 / 2011		
	Mailing Address 15104 NE 209th Place		Transaction ID: 2011052565235-36		
	City Brush Prairie	State WA	Zip Code 98606	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation SENIOR MANAGER GOVERNMENT AFFAIRS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00			

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Paul E. Nielsen		Date of Receipt
	Mailing Address 15104 NE 209th Place		<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Brush Prairie	WA	98606
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011060865250-37
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER GOVERNMENT AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="325.00"/>	<input type="text" value="25.00"/>

B.	Full Name (Last, First, Middle Initial) Paul E. Nielsen		Date of Receipt
	Mailing Address 15104 NE 209th Place		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Brush Prairie	WA	98606
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011062265250-33
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER GOVERNMENT AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="325.00"/>	<input type="text" value="25.00"/>

C.	Full Name (Last, First, Middle Initial) Russell L. Palk		Date of Receipt
	Mailing Address 1105 David Dr.		<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Franklin	TN	37069
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011033065235-116
Name of Employer MedImmune Biologics Inc.		Occupation MANAGER GOVERNMENT AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="390.00"/>	<input type="text" value="30.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="80.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 96 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial)
Russell L. Palk

Mailing Address 1105 David Dr.

City Franklin State TN Zip Code 37069

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

Name of Employer MedImmune Biologics Inc. Occupation MANAGER GOVERNMENT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 04 / 15 / 2011
Transaction ID: 2011041365237-114
 Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Russell L. Palk

Mailing Address 1105 David Dr.

City Franklin State TN Zip Code 37069

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

Name of Employer MedImmune Biologics Inc. Occupation MANAGER GOVERNMENT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 04 / 29 / 2011
Transaction ID: 2011042765237-113
 Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
Russell L. Palk

Mailing Address 1105 David Dr.

City Franklin State TN Zip Code 37069

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

Name of Employer MedImmune Biologics Inc. Occupation MANAGER GOVERNMENT AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 05 / 13 / 2011
Transaction ID: 2011051117248-112
 Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Russell L. Palk		Date of Receipt																					
	Mailing Address 1105 David Dr.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	7		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		2	7		2	0	1	1														
	City State Zip Code Franklin TN 37069		Transaction ID: 2011052565235-111																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: MedImmune Biologics Inc. Occupation: MANAGER GOVERNMENT AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00		<table border="1"> <tr> <td colspan="10">30.00</td> </tr> </table>		30.00																				
30.00																								

B.	Full Name (Last, First, Middle Initial) Russell L. Palk		Date of Receipt																					
	Mailing Address 1105 David Dr.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		1	0		2	0	1	1														
	City State Zip Code Franklin TN 37069		Transaction ID: 2011060865250-111																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: MedImmune Biologics Inc. Occupation: MANAGER GOVERNMENT AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00		<table border="1"> <tr> <td colspan="10">30.00</td> </tr> </table>		30.00																				
30.00																								

C.	Full Name (Last, First, Middle Initial) Russell L. Palk		Date of Receipt																					
	Mailing Address 1105 David Dr.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	4		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		2	4		2	0	1	1														
	City State Zip Code Franklin TN 37069		Transaction ID: 2011062265250-103																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: MedImmune Biologics Inc. Occupation: MANAGER GOVERNMENT AFFAIRS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 390.00		<table border="1"> <tr> <td colspan="10">30.00</td> </tr> </table>		30.00																				
30.00																								

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>90.00</td></tr></table>	90.00
90.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td> </td></tr></table>	

**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 98 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Abigail A. Parta Gossman		Date of Receipt																					
	Mailing Address 1430 Wilson Court		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	9		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		2	9		2	0	1	1														
	City State Zip Code South St. Paul MN 55075		Transaction ID: 2011042765237-53																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00																						
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER GOVERNMENT AFFAIRS																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00																						

B.	Full Name (Last, First, Middle Initial) Abigail A. Parta Gossman		Date of Receipt																					
	Mailing Address 1430 Wilson Court		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	3		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		1	3		2	0	1	1														
	City State Zip Code South St. Paul MN 55075		Transaction ID: 2011051117248-52																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00																						
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER GOVERNMENT AFFAIRS																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00																						

C.	Full Name (Last, First, Middle Initial) Abigail A. Parta Gossman		Date of Receipt																					
	Mailing Address 1430 Wilson Court		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	7		2	0	1	1
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		2	7		2	0	1	1														
	City State Zip Code South St. Paul MN 55075		Transaction ID: 2011052565235-51																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00																						
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER GOVERNMENT AFFAIRS																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00																						

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Abigail A. Parta Gossman		Date of Receipt
	Mailing Address 1430 Wilson Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 10 / 2011
	City	State	Zip Code
	South St. Paul	MN	55075
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011060865250-52
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER GOVERNMENT AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 325.00	<input type="text"/> 25.00

B.	Full Name (Last, First, Middle Initial) Abigail A. Parta Gossman		Date of Receipt
	Mailing Address 1430 Wilson Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 24 / 2011
	City	State	Zip Code
	South St. Paul	MN	55075
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011062265250-45
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER GOVERNMENT AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 325.00	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) Timothy R. Pearson		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 02 / 04 / 2011
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011020265235-12
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT FINANCE & CF	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 1300.00	<input type="text"/> 100.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Timothy R. Pearson		Date of Receipt MM / DD / YYYY 02 / 18 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011021665235-12		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Occupation EXECUTIVE VICE PRESIDENT FINANCE & CF		
	Name of Employer MedImmune LLC		Aggregate Year-to-Date 1300.00		

B.	Full Name (Last, First, Middle Initial) Timothy R. Pearson		Date of Receipt MM / DD / YYYY 03 / 04 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011030294822-12		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Occupation EXECUTIVE VICE PRESIDENT FINANCE & CF		
	Name of Employer MedImmune LLC		Aggregate Year-to-Date 1300.00		

C.	Full Name (Last, First, Middle Initial) Timothy R. Pearson		Date of Receipt MM / DD / YYYY 03 / 18 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011031695552-12		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Occupation EXECUTIVE VICE PRESIDENT FINANCE & CF		
	Name of Employer MedImmune LLC		Aggregate Year-to-Date 1300.00		

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 / 137		
	<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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Timothy R. Pearson		Date of Receipt MM / DD / YYYY 04 / 01 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011033065235-12		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Occupation EXECUTIVE VICE PRESIDENT FINANCE & CF		
	Name of Employer MedImmune LLC		Aggregate Year-to-Date 1300.00		

B.	Full Name (Last, First, Middle Initial) Timothy R. Pearson		Date of Receipt MM / DD / YYYY 04 / 15 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011041365237-12		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Occupation EXECUTIVE VICE PRESIDENT FINANCE & CF		
	Name of Employer MedImmune LLC		Aggregate Year-to-Date 1300.00		

C.	Full Name (Last, First, Middle Initial) Timothy R. Pearson		Date of Receipt MM / DD / YYYY 04 / 29 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011042765237-12		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Occupation EXECUTIVE VICE PRESIDENT FINANCE & CF		
	Name of Employer MedImmune LLC		Aggregate Year-to-Date 1300.00		

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Timothy R. Pearson	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011051117248-12
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT FINANCE & CF Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00	

B.	Full Name (Last, First, Middle Initial) Timothy R. Pearson	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011052565235-11
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT FINANCE & CF Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00	

C.	Full Name (Last, First, Middle Initial) Timothy R. Pearson	Date of Receipt MM / DD / YYYY 06 / 10 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011060865250-12
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT FINANCE & CF Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Timothy R. Pearson	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011062265250-9
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune LLC EXECUTIVE VICE PRESIDENT FINANCE & CF	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

B.	Full Name (Last, First, Middle Initial) Vanessa K. Procter	Date of Receipt MM / DD / YYYY 02 / 04 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011020265235-87
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. DIRECTOR FEDERAL GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

C.	Full Name (Last, First, Middle Initial) Vanessa K. Procter	Date of Receipt MM / DD / YYYY 02 / 18 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011021665235-87
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. DIRECTOR FEDERAL GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 104 / 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Vanessa K. Procter		Date of Receipt MM / DD / YYYY 03 / 04 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011030294822-87		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation DIRECTOR FEDERAL GOVERNMENT AFFAIRS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00			

B.	Full Name (Last, First, Middle Initial) Vanessa K. Procter		Date of Receipt MM / DD / YYYY 03 / 18 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011031695552-87		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation DIRECTOR FEDERAL GOVERNMENT AFFAIRS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00			

C.	Full Name (Last, First, Middle Initial) Vanessa K. Procter		Date of Receipt MM / DD / YYYY 04 / 01 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011033065235-87		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation DIRECTOR FEDERAL GOVERNMENT AFFAIRS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1300.00			

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial)
Vanessa K. Procter

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune Biologics Inc. Occupation DIRECTOR FEDERAL GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 04 / 15 / 2011

Transaction ID: 2011041365237-86

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Vanessa K. Procter

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune Biologics Inc. Occupation DIRECTOR FEDERAL GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 04 / 29 / 2011

Transaction ID: 2011042765237-85

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Vanessa K. Procter

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune Biologics Inc. Occupation DIRECTOR FEDERAL GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 05 / 13 / 2011

Transaction ID: 2011051117248-84

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 300.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Vanessa K. Procter		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011052565235-83
		Amount of Each Receipt this Period	
		<input type="text" value="100.00"/>	
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR FEDERAL GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1300.00"/>	

B.	Full Name (Last, First, Middle Initial) Vanessa K. Procter		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011060865250-84
		Amount of Each Receipt this Period	
		<input type="text" value="100.00"/>	
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR FEDERAL GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1300.00"/>	

C.	Full Name (Last, First, Middle Initial) Vanessa K. Procter		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011062265250-76
		Amount of Each Receipt this Period	
		<input type="text" value="100.00"/>	
Name of Employer MedImmune Biologics Inc.		Occupation DIRECTOR FEDERAL GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1300.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Steve G. Richards	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address 1928 Sunset Harbor Drive	Transaction ID: 2011042765237-110
	City State Zip Code Miami Beach FL 33139	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. ASSOCIATE DIRECTOR PUBLIC HEALTH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

B.	Full Name (Last, First, Middle Initial) Steve G. Richards	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address 1928 Sunset Harbor Drive	Transaction ID: 2011051117248-109
	City State Zip Code Miami Beach FL 33139	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. ASSOCIATE DIRECTOR PUBLIC HEALTH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) Steve G. Richards	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address 1928 Sunset Harbor Drive	Transaction ID: 2011052565235-108
	City State Zip Code Miami Beach FL 33139	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. ASSOCIATE DIRECTOR PUBLIC HEALTH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Steve G. Richards	Date of Receipt MM / DD / YYYY 06 / 10 / 2011
	Mailing Address 1928 Sunset Harbor Drive	Transaction ID: 2011060865250-108
	City State Zip Code Miami Beach FL 33139	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. ASSOCIATE DIRECTOR PUBLIC HEALTH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

B.	Full Name (Last, First, Middle Initial) Steve G. Richards	Date of Receipt MM / DD / YYYY 06 / 24 / 2011
	Mailing Address 1928 Sunset Harbor Drive	Transaction ID: 2011062265250-100
	City State Zip Code Miami Beach FL 33139	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. ASSOCIATE DIRECTOR PUBLIC HEALTH	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

C.	Full Name (Last, First, Middle Initial) Brian M. Rosen	Date of Receipt MM / DD / YYYY 01 / 21 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011011914249-29
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. SENIOR DIRECTOR GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	175.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Brian M. Rosen	Date of Receipt MM / DD / YYYY 02 / 04 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011020265235-29
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. SENIOR DIRECTOR GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Brian M. Rosen	Date of Receipt MM / DD / YYYY 02 / 18 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011021665235-29
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. SENIOR DIRECTOR GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Brian M. Rosen	Date of Receipt MM / DD / YYYY 03 / 04 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011030294822-29
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MedImmune Biologics Inc. SENIOR DIRECTOR GOVERNMENT AFFAIRS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	375.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 / 137	
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Brian M. Rosen		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011031695552-29
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR DIRECTOR GOVERNMENT AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="125.00"/>
		<input type="text" value="1000.00"/>	

B.	Full Name (Last, First, Middle Initial) Brian M. Rosen		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011033065235-29
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR DIRECTOR GOVERNMENT AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="125.00"/>
		<input type="text" value="1000.00"/>	

C.	Full Name (Last, First, Middle Initial) Brian M. Rosen		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011041365237-29
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR DIRECTOR GOVERNMENT AFFAIRS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="125.00"/>
		<input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="375.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 111 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial)
Matthew D. Rousculp

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation DIRECTOR HOPE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 03 / 04 / 2011
Transaction ID: 2011030294822-109
 Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Matthew D. Rousculp

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation DIRECTOR HOPE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 03 / 18 / 2011
Transaction ID: 2011031695552-109
 Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Matthew D. Rousculp

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation DIRECTOR HOPE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 04 / 01 / 2011
Transaction ID: 2011033065235-109
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 150.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 112 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial) Matthew D. Rousculp		Date of Receipt MM / DD / YYYY 04 / 15 / 2011	
Mailing Address One MedImmune Way		Transaction ID: 2011041365237-107	
City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer MedImmune LLC	Occupation DIRECTOR HOPE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

B.

Full Name (Last, First, Middle Initial) Matthew D. Rousculp		Date of Receipt MM / DD / YYYY 04 / 29 / 2011	
Mailing Address One MedImmune Way		Transaction ID: 2011042765237-106	
City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer MedImmune LLC	Occupation DIRECTOR HOPE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

C.

Full Name (Last, First, Middle Initial) Matthew D. Rousculp		Date of Receipt MM / DD / YYYY 05 / 13 / 2011	
Mailing Address One MedImmune Way		Transaction ID: 2011051117248-105	
City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer MedImmune LLC	Occupation DIRECTOR HOPE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Matthew D. Rousculp		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011052565235-104
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune LLC		Occupation DIRECTOR HOPE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

B.	Full Name (Last, First, Middle Initial) Matthew D. Rousculp		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011060865250-105
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune LLC		Occupation DIRECTOR HOPE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

C.	Full Name (Last, First, Middle Initial) Matthew D. Rousculp		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 1 1	
	City	State	Zip Code	Transaction ID: 2011062265250-97
	Gaithersburg	MD	20878	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer MedImmune LLC		Occupation DIRECTOR HOPE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00		

SUBTOTAL of Receipts This Page (optional) ▶

150.00

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

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

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

FOR LINE NUMBER: PAGE 114 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial)
Julie A. Sharp

Mailing Address 319 North Bernardo Avenue

City State Zip Code
Mountain View CA 94043

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

Name of Employer Occupation
MedImmune LLC ASSOCIATE DIRECTOR CLINICAL PLANNING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2011

Transaction ID: 2011030294822-80

Amount of Each Receipt this Period
45.00

B. Full Name (Last, First, Middle Initial)
Julie A. Sharp

Mailing Address 319 North Bernardo Avenue

City State Zip Code
Mountain View CA 94043

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

Name of Employer Occupation
MedImmune LLC ASSOCIATE DIRECTOR CLINICAL PLANNING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2011

Transaction ID: 2011031695552-80

Amount of Each Receipt this Period
45.00

C. Full Name (Last, First, Middle Initial)
Julie A. Sharp

Mailing Address 319 North Bernardo Avenue

City State Zip Code
Mountain View CA 94043

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

Name of Employer Occupation
MedImmune LLC ASSOCIATE DIRECTOR CLINICAL PLANNING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2011

Transaction ID: 2011033065235-80

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional) ► **135.00**

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

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

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

FOR LINE NUMBER: PAGE 115 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial)
Julie A. Sharp

Mailing Address 319 North Bernardo Avenue

City State Zip Code
Mountain View CA 94043

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

Name of Employer Occupation
MedImmune LLC ASSOCIATE DIRECTOR CLINICAL PLANNING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt
MM / DD / YYYY
04 / 15 / 2011

Transaction ID: 2011041365237-80

Amount of Each Receipt this Period
45.00

B. Full Name (Last, First, Middle Initial)
Julie A. Sharp

Mailing Address 319 North Bernardo Avenue

City State Zip Code
Mountain View CA 94043

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

Name of Employer Occupation
MedImmune LLC ASSOCIATE DIRECTOR CLINICAL PLANNING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt
MM / DD / YYYY
04 / 29 / 2011

Transaction ID: 2011042765237-79

Amount of Each Receipt this Period
45.00

C. Full Name (Last, First, Middle Initial)
Julie A. Sharp

Mailing Address 319 North Bernardo Avenue

City State Zip Code
Mountain View CA 94043

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

Name of Employer Occupation
MedImmune LLC ASSOCIATE DIRECTOR CLINICAL PLANNING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt
MM / DD / YYYY
05 / 13 / 2011

Transaction ID: 2011051117248-78

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional) ► **135.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Julie A. Sharp		Date of Receipt
	Mailing Address 319 North Bernardo Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 27 / 2011
	City	State	Zip Code
	Mountain View	CA	94043
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011052565235-77
Name of Employer MedImmune LLC		Occupation ASSOCIATE DIRECTOR CLINICAL PLANNING	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00	45.00

B.	Full Name (Last, First, Middle Initial) Julie A. Sharp		Date of Receipt
	Mailing Address 319 North Bernardo Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 10 / 2011
	City	State	Zip Code
	Mountain View	CA	94043
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011060865250-78
Name of Employer MedImmune LLC		Occupation ASSOCIATE DIRECTOR CLINICAL PLANNING	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00	45.00

C.	Full Name (Last, First, Middle Initial) Julie A. Sharp		Date of Receipt
	Mailing Address 319 North Bernardo Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 24 / 2011
	City	State	Zip Code
	Mountain View	CA	94043
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011062265250-70
Name of Employer MedImmune LLC		Occupation ASSOCIATE DIRECTOR CLINICAL PLANNING	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 585.00	45.00

SUBTOTAL of Receipts This Page (optional)	135.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Andrew D. Skibo		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011031695552-122
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT OPERATIONS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 520.00	<input type="text"/> 40.00

B.	Full Name (Last, First, Middle Initial) Andrew D. Skibo		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011033065235-122
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT OPERATIONS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 520.00	<input type="text"/> 40.00

C.	Full Name (Last, First, Middle Initial) Andrew D. Skibo		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011041365237-119
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT OPERATIONS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 520.00	<input type="text"/> 40.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 120.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 / 137
	<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)
 MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Andrew D. Skibo	Date of Receipt MM / DD / YYYY 04 / 29 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011042765237-118
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT OPERATIONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00	

B.	Full Name (Last, First, Middle Initial) Andrew D. Skibo	Date of Receipt MM / DD / YYYY 05 / 13 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011051117248-117
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT OPERATIONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00	

C.	Full Name (Last, First, Middle Initial) Andrew D. Skibo	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address One MedImmune Way	Transaction ID: 2011052565235-116
	City State Zip Code Gaithersburg MD 20878	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT OPERATIONS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 520.00	

SUBTOTAL of Receipts This Page (optional)	▶	120.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 119 / 137
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial)
Andrew D. Skibo

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 10 / 2011

Transaction ID: 2011060865250-116

Amount of Each Receipt this Period 40.00

B.

Full Name (Last, First, Middle Initial)
Andrew D. Skibo

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation EXECUTIVE VICE PRESIDENT OPERATIONS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt 06 / 24 / 2011

Transaction ID: 2011062265250-108

Amount of Each Receipt this Period 40.00

C.

Full Name (Last, First, Middle Initial)
Nick B. Tressler

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR BST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 04 / 01 / 2011

Transaction ID: 2011033065235-40

Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 110.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 120 / 137
(check only one)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial)
Nick B. Tressler

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR BST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 04 / 15 / 2011

Transaction ID: 2011041365237-40

Amount of Each Receipt this Period 30.00

B.

Full Name (Last, First, Middle Initial)
Nick B. Tressler

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR BST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 04 / 29 / 2011

Transaction ID: 2011042765237-39

Amount of Each Receipt this Period 30.00

C.

Full Name (Last, First, Middle Initial)
Nick B. Tressler

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR BST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 13 / 2011

Transaction ID: 2011051117248-38

Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

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

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

FOR LINE NUMBER: PAGE 121 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial)
Nick B. Tressler

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR BST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 05 / 27 / 2011
Transaction ID: 2011052565235-37
 Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Nick B. Tressler

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR BST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 10 / 2011
Transaction ID: 2011060865250-38
 Amount of Each Receipt this Period 30.00

C. Full Name (Last, First, Middle Initial)
Nick B. Tressler

Mailing Address One MedImmune Way

City Gaithersburg State MD Zip Code 20878

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

Name of Employer MedImmune LLC Occupation SENIOR DIRECTOR BST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt 06 / 24 / 2011
Transaction ID: 2011062265250-34
 Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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

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

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

FOR LINE NUMBER: PAGE 122 / 137
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial)
Michael P. Walsh
 Mailing Address 45 Wildwood Street
 City Winchester State MA Zip Code 01890
 Date of Receipt 04 / 29 / 2011
 Transaction ID: 2011042765237-101
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MedImmune Biologics Inc. Occupation ADVOCACY DEVELOPMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 325.00

B. Full Name (Last, First, Middle Initial)
Michael P. Walsh
 Mailing Address 45 Wildwood Street
 City Winchester State MA Zip Code 01890
 Date of Receipt 05 / 13 / 2011
 Transaction ID: 2011051117248-100
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MedImmune Biologics Inc. Occupation ADVOCACY DEVELOPMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 325.00

C. Full Name (Last, First, Middle Initial)
Michael P. Walsh
 Mailing Address 45 Wildwood Street
 City Winchester State MA Zip Code 01890
 Date of Receipt 05 / 27 / 2011
 Transaction ID: 2011052565235-99
 Amount of Each Receipt this Period 25.00
 FEC ID number of contributing federal political committee. C
 Name of Employer MedImmune Biologics Inc. Occupation ADVOCACY DEVELOPMENT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 325.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Michael P. Walsh		Date of Receipt
	Mailing Address 45 Wildwood Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 10 / 2011
	City	State	Zip Code
	Winchester	MA	01890
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011060865250-100
Name of Employer MedImmune Biologics Inc.		Occupation ADVOCACY DEVELOPMENT MANAGER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	<input type="text"/> 25.00

B.	Full Name (Last, First, Middle Initial) Michael P. Walsh		Date of Receipt
	Mailing Address 45 Wildwood Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 24 / 2011
	City	State	Zip Code
	Winchester	MA	01890
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011062265250-92
Name of Employer MedImmune Biologics Inc.		Occupation ADVOCACY DEVELOPMENT MANAGER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) Jenell H. Weaver		Date of Receipt
	Mailing Address 14450 Twin Oaks Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 29 / 2011
	City	State	Zip Code
	Carmel	IN	46032
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011042765237-24
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER NATIONAL ACCOUNTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 75.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 / 137		
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Jenell H. Weaver			Date of Receipt MM / DD / YYYY 05 / 13 / 2011		
	Mailing Address 14450 Twin Oaks Dr			Transaction ID: 2011051117248-24		
	City Carmel	State IN	Zip Code 46032	Amount of Each Receipt this Period 25.00		
	FEC ID number of contributing federal political committee. C					
	Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER NATIONAL ACCOUNTS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00				

B.	Full Name (Last, First, Middle Initial) Jenell H. Weaver			Date of Receipt MM / DD / YYYY 05 / 27 / 2011		
	Mailing Address 14450 Twin Oaks Dr			Transaction ID: 2011052565235-23		
	City Carmel	State IN	Zip Code 46032	Amount of Each Receipt this Period 25.00		
	FEC ID number of contributing federal political committee. C					
	Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER NATIONAL ACCOUNTS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00				

C.	Full Name (Last, First, Middle Initial) Jenell H. Weaver			Date of Receipt MM / DD / YYYY 06 / 10 / 2011		
	Mailing Address 14450 Twin Oaks Dr			Transaction ID: 2011060865250-24		
	City Carmel	State IN	Zip Code 46032	Amount of Each Receipt this Period 25.00		
	FEC ID number of contributing federal political committee. C					
	Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER NATIONAL ACCOUNTS			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00				

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 / 137
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Jenell H. Weaver		Date of Receipt
	Mailing Address 14450 Twin Oaks Dr		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Carmel	IN	46032
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011062265250-20
Name of Employer MedImmune Biologics Inc.		Occupation SENIOR MANAGER NATIONAL ACCOUNTS	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="325.00"/>	<input type="text" value="25.00"/>

B.	Full Name (Last, First, Middle Initial) Paul Williams		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011020265235-108
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="975.00"/>	<input type="text" value="75.00"/>

C.	Full Name (Last, First, Middle Initial) Paul Williams		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="02"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee. C		Transaction ID: 2011021665235-108
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT SALES	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="975.00"/>	<input type="text" value="75.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="175.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 / 137		
	<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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Paul Williams		Date of Receipt MM / DD / YYYY 03 / 04 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011030294822-108		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation VICE PRESIDENT SALES			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 975.00			

B.	Full Name (Last, First, Middle Initial) Paul Williams		Date of Receipt MM / DD / YYYY 03 / 18 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011031695552-108		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation VICE PRESIDENT SALES			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 975.00			

C.	Full Name (Last, First, Middle Initial) Paul Williams		Date of Receipt MM / DD / YYYY 04 / 01 / 2011		
	Mailing Address One MedImmune Way		Transaction ID: 2011033065235-108		
	City Gaithersburg	State MD	Zip Code 20878	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MedImmune Biologics Inc.	Occupation VICE PRESIDENT SALES			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 975.00			

SUBTOTAL of Receipts This Page (optional)	▶	225.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Paul Williams		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT SALES	Transaction ID: 2011041365237-106
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="975.00"/>	<input type="text" value="75.00"/>

B.	Full Name (Last, First, Middle Initial) Paul Williams		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="04"/> / <input type="text" value="29"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT SALES	Transaction ID: 2011042765237-105
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="975.00"/>	<input type="text" value="75.00"/>

C.	Full Name (Last, First, Middle Initial) Paul Williams		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation VICE PRESIDENT SALES	Transaction ID: 2011051117248-104
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="975.00"/>	<input type="text" value="75.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="225.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 128 / 137
(check only one)

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

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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.

Full Name (Last, First, Middle Initial) Paul Williams		Date of Receipt MM / DD / YYYY 05 / 27 / 2011
Mailing Address One MedImmune Way		Transaction ID: 2011052565235-103
City Gaithersburg	State Zip Code MD 20878	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer MedImmune Biologics Inc.	Occupation VICE PRESIDENT SALES	Aggregate Year-to-Date ▼ 975.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Paul Williams		Date of Receipt MM / DD / YYYY 06 / 10 / 2011
Mailing Address One MedImmune Way		Transaction ID: 2011060865250-104
City Gaithersburg	State Zip Code MD 20878	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer MedImmune Biologics Inc.	Occupation VICE PRESIDENT SALES	Aggregate Year-to-Date ▼ 975.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Paul Williams		Date of Receipt MM / DD / YYYY 06 / 24 / 2011
Mailing Address One MedImmune Way		Transaction ID: 2011062265250-96
City Gaithersburg	State Zip Code MD 20878	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer MedImmune Biologics Inc.	Occupation VICE PRESIDENT SALES	Aggregate Year-to-Date ▼ 975.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	225.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 129 / 137
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Daniel M. Wygal		Date of Receipt
	Mailing Address 6828 Point Dr.		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Edina	MN	55435
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation AREA BUSINESS MANAGER	Transaction ID: 2011052565235-48
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="260.00"/>	<input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) Daniel M. Wygal		Date of Receipt
	Mailing Address 6828 Point Dr.		<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Edina	MN	55435
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation AREA BUSINESS MANAGER	Transaction ID: 2011060865250-49
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="260.00"/>	<input type="text" value="20.00"/>

C.	Full Name (Last, First, Middle Initial) Daniel M. Wygal		Date of Receipt
	Mailing Address 6828 Point Dr.		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Edina	MN	55435
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MedImmune Biologics Inc.		Occupation AREA BUSINESS MANAGER	Transaction ID: 2011062265250-42
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="260.00"/>	<input type="text" value="20.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="60.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 / 137
	<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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Alexander Anthony Zukiwski		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="01"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011011914249-121
		Amount of Each Receipt this Period	<input type="text" value="192.00"/>
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT CLIN. RSC & C	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="960.00"/>

B.	Full Name (Last, First, Middle Initial) Alexander Anthony Zukiwski		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="02"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011020265235-121
		Amount of Each Receipt this Period	<input type="text" value="192.00"/>
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT CLIN. RSC & C	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="960.00"/>

C.	Full Name (Last, First, Middle Initial) Alexander Anthony Zukiwski		Date of Receipt
	Mailing Address One MedImmune Way		<input type="text" value="02"/> / <input type="text" value="18"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Gaithersburg	MD	20878
	FEC ID number of contributing federal political committee.		Transaction ID: 2011021665235-121
		Amount of Each Receipt this Period	<input type="text" value="192.00"/>
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT CLIN. RSC & C	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="960.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="576.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 131 / 137	
	(check only one)			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A.	Full Name (Last, First, Middle Initial) Alexander Anthony Zukiwski		Date of Receipt	
	Mailing Address One MedImmune Way		M M / D D / Y Y Y Y 03 / 04 / 2011	
	City	State	Zip Code	Transaction ID: 2011030294822-121
	Gaithersburg	MD	20878	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		192.00	
Name of Employer MedImmune LLC		Occupation EXECUTIVE VICE PRESIDENT CLIN. RSC & C		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 960.00		

SUBTOTAL of Receipts This Page (optional)	▶	192.00
TOTAL This Period (last page this line number only)	▶	20259.00

**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)

PAGE 132 / 137

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

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)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial) Allyson Schwartz for Congress <hr/> Mailing Address PO Box 2232 <hr/> City Jenkintown State PA Zip Code 19046 <hr/> Purpose of Disbursement 2012 Primary Candidate Name Allyson Y. Schwartz <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: F120503346F57C9577A Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Anna Eshoo for Congress <hr/> Mailing Address 555 Capitol Mall, Suite 1425 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement 2012 Primary Candidate Name Anna G. Eshoo <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 14 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: AE08CB0B91B9607D521 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 1 1
	Amount of Each Disbursement this Period 4000.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Ben Cardin for Senate <hr/> Mailing Address PO Box 21093 <hr/> City Catonsville State MD Zip Code 21228 <hr/> Purpose of Disbursement 2012 Primary Candidate Name Benjamin L. Cardin <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B80EC58272057E14207 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 1 1
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

<p>A. Full Name (Last, First, Middle Initial) Building a Majority Pac (BAMPAC)</p> <p>Mailing Address PO Box 2315</p> <p>City Baltimore State MD Zip Code 21203</p> <p>Purpose of Disbursement 2011 Contribution</p> <p>Candidate Name Building a Majority Pac (BAMPAC)</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Contribution</p>	<p>Transaction ID: 2B1F4AD83098EEE140F</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Citizens for Prosperity in America Today Pac</p> <p>Mailing Address 228 S Washington St Ste 115</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement 2011 Contribution</p> <p>Candidate Name Citizens for Prosperity in America Today Pac</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Contribution</p>	<p>Transaction ID: B387E21DD62266138C1</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Long Leaf Pine Pac</p> <p>Mailing Address 700 13th Street, NW Suite 600</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement 2011 Contribution</p> <p>Candidate Name Long Leaf Pine Pac</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Contribution</p>	<p>Transaction ID: 08630489ECB1B7CACCC3</p> <p>Date of Disbursement 03 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial) Majority Initiative To Keep Electing Republicans Fund A.K.A Mike R Fund Mailing Address PO Box 2485 City Springfield State VA Zip Code 22152 Purpose of Disbursement 2011 Contribution Candidate Name Majority Initiative To Keep Electing Republicans Fund A.K.A Mike R Fund Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	Transaction ID: 1453C6F61F7E84E9613 Date of Disbursement 05 / 26 / 2011
	Amount of Each Disbursement this Period 2000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) Marsha Blackburn for Congress, Inc. Mailing Address PO Box 3750 City Brentwood State TN Zip Code 37024 Purpose of Disbursement 2012 Primary Candidate Name Marsha Blackburn Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 07	Transaction ID: ACAF43F9B905D942EC3 Date of Disbursement 05 / 26 / 2011
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
C. Full Name (Last, First, Middle Initial) Michael Burgess for Congress Mailing Address PO Box 2334 City Denton State TX Zip Code 76202 Purpose of Disbursement 2012 Primary Candidate Name Michael Clifton Burgess Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 26	Transaction ID: E0101388CD7928F4EE5 Date of Disbursement 03 / 29 / 2011
	Amount of Each Disbursement this Period 2000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 135 / 137

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

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NAME OF COMMITTEE (In Full)

MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial) Republican Party of Wisconsin Mailing Address 148 E. Johnson Street City Madison State WI Zip Code 53703 Purpose of Disbursement 2011 Contribution Candidate Name Republican Party of Wisconsin Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: DC5C391F81E42269158 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00
B. Full Name (Last, First, Middle Initial) We the People Pac Mailing Address PO Box 2232 City Jenkintown State PA Zip Code 19046 Purpose of Disbursement 2011 Contribution Candidate Name We the People Pac Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 7560AA91BD36FDFB0A4 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 1 1
	Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ►

2750.00

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

19750.00

**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)

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

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NAME OF COMMITTEE (In Full)
MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial) Committee to Elect Niehaus <hr/> Mailing Address 1131 Little Indian Creek Rd <hr/> City New Richmond State OH Zip Code 45157 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: A17AD32277419A916A9 Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2011
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Dave Burke for State Representative <hr/> Mailing Address 411 W Fifth Street <hr/> City Marysville State OH Zip Code 43040 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: AFAB9F4278CBA7046EA Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2011
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Friends of Faber <hr/> Mailing Address 7703 St. Rt 703 <hr/> City Celina State OH Zip Code 45822 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31BEBF63584A4D3E6CB Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2011
	Amount of Each Disbursement this Period 250.00
	Category/ Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 137 / 137

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

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NAME OF COMMITTEE (In Full)

MedImmune Biologics, Inc. Employee Political Awareness Committee (MEDIPAC)

A. Full Name (Last, First, Middle Initial) Jimmy Stewart for State Senate <hr/> Mailing Address 1021 Four Mile Creek Road <hr/> City Coolville State OH Zip Code 45723 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1AA88B856863AEBA011 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) Robert Tommy Tomlinson for Senate <hr/> Mailing Address 2411 ELFRETHS ALLEY <hr/> City BENSALEM State PA Zip Code 19020 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: A1E430F13C019B4DA64 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

750.00

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

1750.00