

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

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

FOR LINE NUMBER: PAGE 9 OF 62

(check only one)

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

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NAME OF COMMITTEE (In Full)

Sanofi US Services Inc. Employees' Political Action Committee

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

A. Boykin, Samuel, S, ,

Mailing Address 55 Corporate Drive

City
BridgewaterState
NJZip Code
08807FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sanofi US Services Inc.

Occupation (for Individual)

DCV Hospital Exec Account Prof AWB1

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 27 / 2020

Transaction ID : A2020-1055255

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

B. Boykin, Stephanie, , ,

Mailing Address 55 Corporate Drive

City
BridgewaterState
NJZip Code
08807FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Alere Inc.

Occupation (for Individual)

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 27 / 2020

Transaction ID : A2020-1055277

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

C. Breen, Michael, J, ,

Mailing Address One Discovery Drive

City
SwiftwaterState
PAZip Code
18370FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Sanofi US Services Inc.

Occupation (for Individual)

Senior Key Account Manager Vaccines

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

307.68

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
04 / 10 / 2020

Transaction ID : A2020-849864

Amount of Each Receipt this Period

38.46

☐ Memo Item

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

10038.46

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