

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 PFIZER INC. PAC

ADDRESS (number and street) 66 Hudson Blvd East Check if different than previously reported. (ACC) NEW YORK NY 10001

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00016683 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, May 20, Aug 20, Nov 20, Mar 20, Jun 20, Sep 20, Dec 20, Apr 20, Jul 20, Oct 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 04 / 01 / 2026 through 04 / 30 / 2026

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 Cotarelo, Juan, C.,

Signature of Treasurer Cotarelo, Juan, C., Date 05 / 19 / 2026

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**PFIZER INC. PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2026"/>	<input type="text"/>	<input type="text" value="354755.02"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="296059.49"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="66077.06"/>	<input type="text" value="274816.53"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="362136.55"/>	<input type="text" value="629571.55"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="60500.00"/>	<input type="text" value="327935.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="301636.55"/>	<input type="text" value="301636.55"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**PFIZER INC. PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	29615.24	100232.30
(ii) Unitemized .....	36461.82	174584.23
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	66077.06	274816.53
(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) .....	66077.06	274816.53
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	66077.06	274816.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	66077.06	274816.53

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	185.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	185.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	60500.00	314000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	13750.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	60500.00	327935.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	60500.00	327935.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	66077.06	274816.53
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	66077.06	274816.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	185.00
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	185.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Aaronson, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SVP & Chief Commercial Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-450**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Aaronson, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SVP & Chief Commercial Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-448**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Alfaro, Arturo, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Site Care Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1149**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	248.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Alfaro, Arturo, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Site Care Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1143**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. Anderson, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Chief of Staff, R&D  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-854**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Anderson, Susan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Chief of Staff, R&D  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-850**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	123.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Andrews, Emma, N, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Global Research And Developmen Occupation (for Individual) VP, Patient Advocacy and Business Un  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-72**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

**B. Andrews, Emma, N, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Global Research And Developmen Occupation (for Individual) VP, Patient Advocacy and Business Ur  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-71**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

**C. Banks, Danielle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SHR Level 1  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1614**  
 Amount of Each Receipt this Period  
 25.05  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	233.39
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Barbour, Lance, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Senior Director, US Oncology Policy an  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1613**  
 Amount of Each Receipt this Period 25.25  
 Memo Item

**B. Barrett, Francis, Xavier, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Director, SAS & Patient Support  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-2638**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Barrett, Francis, Xavier, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Director, SAS & Patient Support  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-2623**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	108.59
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Bishop-Murphy, Melissa, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Director, State Government Rel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-345**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**B. Bishop-Murphy, Melissa, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Director, State Government Rel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-343**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**C. Blount, Jenai, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Sales Enablement Manager - GU Nator  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-401**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	458.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Blount, Jenai, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-399</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 41.67		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pfizer Inc		Occupation (for Individual) Sales Enablement Manager - GU Nation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.36			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Boothe, Monica, Sweeney, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1917</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 42.67		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pharmacia & Upjohn Company		Occupation (for Individual) Area Business Manager (Secondment)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 341.36			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Boothe, Monica, Sweeney, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1906</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 42.67		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pharmacia & Upjohn Company		Occupation (for Individual) Area Business Manager (Secondment)			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 341.36			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	127.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Bottone, Lynn, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-2110</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc.	Occupation (for Individual) SVP, Quality, Safety and Environmenta	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bottone, Lynn, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-2099</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc.	Occupation (for Individual) SVP, Quality, Safety and Environmenta	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Bourla, Albert, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-436</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 208.33
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Chairman & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1666.64	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	416.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Bourla, Albert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Chairman & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-434**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**B. Breheny, Edward, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) RD Finance Lead \_ Category Partner I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-801**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Breheny, Edward, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) RD Finance Lead \_ Category Partner L  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-797**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	291.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Broadus, Alexandra, Lambert, ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-2635</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 30.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Director, Specialty Pharmacy Provider	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Broadus, Alexandra, Lambert, ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-2620</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 30.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Director, Specialty Pharmacy Provider	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Brodbeck, Sheila, Mary, ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-2113</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) SVP & Chief Counsel, Litigation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 333.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	101.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Brodbeck, Sheila, Mary, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SVP & Chief Counsel, Litigation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2102**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Brophy, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Regional Business Director Vaccines, N  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-544**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Brophy, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Regional Business Director Vaccines, N  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-542**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Brown, Norchelle, Monique, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1617</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 42.00		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pfizer, Inc		Occupation (for Individual) Sr. Manager, Alliance Development			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 336.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Brown, Norchelle, Monique, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1608</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 42.00		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pfizer, Inc		Occupation (for Individual) Sr. Manager, Alliance Development			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 336.00			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Brownlie, Thomas, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-829</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 109.17		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pfizer Inc		Occupation (for Individual) Vice President, State Policy and Gover			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 873.36			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	193.17
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Brownlie, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Vice President, State Policy and Gover  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 873.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-825**  
 Amount of Each Receipt this Period  
 109.17  
 Memo Item

**B. Budaj, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Sr. Director/Team Lead, Contract Strat  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-1111**  
 Amount of Each Receipt this Period  
 41.67  
 Memo Item

**C. Budaj, Mark, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Sr. Director/Team Lead, Contract Strat  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1106**  
 Amount of Each Receipt this Period  
 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	192.51
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Burton, William, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-293</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Key Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Burton, William, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-291</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Key Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Bush Kelly, Jaime, Nichole, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1638</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) HSP Level 3	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 725.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Bush Kelly, Jaime, Nichole, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) HSP Level 3  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1628**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Butters, Amy, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Business Adoption Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.85

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-2122**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Butters, Amy, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Business Adoption Lead  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 550.85

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2111**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	124.17
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Byala, Brian, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-139</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) SVP & Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Byala, Brian, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-138</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) SVP & Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Cabrera, Ernesto, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1501</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 25.25
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) HSP Level 3	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 202.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	233.59
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Capers, Christi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Field Medical Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-338**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Capers, Christi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Field Medical Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-336**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Carlson, Lisa, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Area Business Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-389**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	101.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Carlson, Lisa, M, ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-387</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	
Zip Code 10001		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Area Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Carrillo, Francisco, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1544</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 150.00
City New York	State NY	
Zip Code 10001		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Senior Director, Federal Government R	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Carrillo, Francisco, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1535</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 150.00
City New York	State NY	
Zip Code 10001		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Senior Director, Federal Government R	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	341.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**PFIZER INC. PAC**

**A. Carroll, Patricia, Lorraine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) US Customer Engagement Primary Car  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-454**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Carroll, Patricia, Lorraine, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) US Customer Engagement Primary Ca  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-452**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Casbon, Tully, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SHR Level 3  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-474**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Casbon, Tully, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SHR Level 3  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-472**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Casey, Ana, Wikes, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) US Commercial Enablement Lead (9-m  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-595**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. Casey, Ana, Wikes, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) US Commercial Enablement Lead (9-mc  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-593**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	111.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Castillo, Sharon, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Director, Government Affairs/Po  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-1167**  
 Amount of Each Receipt this Period 105.00  
 Memo Item

**B. Castillo, Sharon, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Director, Government Affairs/Po  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-1161**  
 Amount of Each Receipt this Period 105.00  
 Memo Item

**C. Chang, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Sr. Director, HV&E Team Lead Genitour  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-1296**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Chang, Jane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Sr. Director, HV&E Team Lead Genitou  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1288**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. Childress, Bradley, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Oncology Key Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 851.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-235**  
 Amount of Each Receipt this Period 106.42  
 Memo Item

**C. Childress, Bradley, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Oncology Key Account Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 851.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-233**  
 Amount of Each Receipt this Period 106.42  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	252.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Christian, Amy, Michelle, ,</b>		Date of Receipt MM / DD / YYYY <b>04 / 15 / 2026</b> <b>Transaction ID : 2026041612283-1258</b>
Mailing Address <b>66 Hudson Blvd East</b>		Amount of Each Receipt this Period <b>140.00</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10001</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) <b>Pfizer Inc</b>	Occupation (for Individual) <b>Director, State Government Relations</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1120.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Christian, Amy, Michelle, ,</b>		Date of Receipt MM / DD / YYYY <b>04 / 30 / 2026</b> <b>Transaction ID : 2026050411243-1252</b>
Mailing Address <b>66 Hudson Blvd East</b>		Amount of Each Receipt this Period <b>140.00</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10001</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) <b>Pfizer Inc</b>	Occupation (for Individual) <b>Director, State Government Relations</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1120.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Cirillo, Jessica, , ,</b>		Date of Receipt MM / DD / YYYY <b>04 / 15 / 2026</b> <b>Transaction ID : 2026041612283-1704</b>
Mailing Address <b>66 Hudson Blvd East</b>		Amount of Each Receipt this Period <b>208.33</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10001</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) <b>Pfizer, Inc</b>	Occupation (for Individual) <b>Director, HV&amp;E Migraine</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <b>624.99</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>488.33</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Cirillo, Jessica, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Director, HV&E Migraine  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 624.99

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1694**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**B. Claeys, Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Senior Director, Global Trade Policy &  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1507**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

**C. Claeys, Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Senior Director, Global Trade Policy &  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1499**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	292.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Clayton, Kelly, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1483</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 137.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Director, State Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1096.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Clayton, Kelly, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1475</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 137.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Director, State Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1096.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Clemmons, Gregory, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1507</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 26.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) HSP Level 2	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 208.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Cotarelo, Juan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Sr. Mgr, Political Outreach and Head o  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1266.63

Date of Receipt  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-483**  
 Amount of Each Receipt this Period 8.33  
 Memo Item

**B. Cotarelo, Juan, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Sr. Mgr, Political Outreach and Head o  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1266.63

Date of Receipt  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-481**  
 Amount of Each Receipt this Period 8.32  
 Memo Item

**C. Cox, Edward, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) VP, R&D Forward Impact Engineering a  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-2608**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	120.82
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Cox, Edward, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) VP, R&D Forward Impact Engineering a  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-2594**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Crabtree, Stephanie, Sullivan, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Vaccines Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-298**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Crabtree, Stephanie, Sullivan, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Vaccines Account Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-296**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Crane, Michelle, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-827</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 208.33
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Area Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 934.32	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Crane, Michelle, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-823</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 208.33
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Area Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 934.32	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Damico, Jennifer, B, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-137</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) SVP & Controller	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 833.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	520.83
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Damico, Jennifer, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SVP & Controller  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-136**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Daniels, Amanda, Josephson, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) VP, Global Marketing Cibirngo, Eucrisa  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-2148**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

**C. Daniels, Amanda, Josephson, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) VP, Global Marketing Cibirngo, Eucrisa  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-2137**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	194.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Daoust, Steven, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) HSP Level 3  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-324**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Daoust, Steven, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) HSP Level 3  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-322**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Deignan, Martina, Mary, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) President, Oncology Commercial  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-1652**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	164.17
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Deignan, Martina, Mary, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1642</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) President, Oncology Commercial	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Demps, Mark, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1780</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 35.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Regional Business Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Demps, Mark, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1770</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 35.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Regional Business Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 280.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	174.17
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Denton, David, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1585</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 208.33
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Chief Financial Officer, Executive Vic	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.64	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Denton, David, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1576</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 208.33
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Chief Financial Officer, Executive Vic	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.64	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Dermody, Katherine, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-403</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 208.33
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Breast Cancer Thought Leader Engager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 933.32	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	624.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Dermody, Katherine, A, ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-401</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 208.33
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Breast Cancer Thought Leader Engage	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 933.32	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Devlin, Frances, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1012</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Senior Director & Head, International	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Devlin, Frances, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1008</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Senior Director & Head, International	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 333.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	291.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Dickens, Cynthia, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-980</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Senior Director, People Experience, US	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Dickens, Cynthia, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-976</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Senior Director, People Experience, US	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Donnelly, Erling, Thor, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1013</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 108.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Global Marketing Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 864.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	316.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Donnelly, Erling, Thor, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Global Marketing Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 864.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1009**  
 Amount of Each Receipt this Period 108.00  
 Memo Item

**B. Doyle, Patrick, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) US Customer Engagement Platform Le  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-223**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Doyle, Patrick, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) US Customer Engagement Platform Lea  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-221**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	316.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Dudek, Richard, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Vice President USMA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-282**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Dudek, Richard, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Vice President USMA  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-280**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Dufour, Jeff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) US Antivirals & Diagnostics Lead  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-551**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Dufour, Jeff, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) US Antivirals & Diagnostics Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 336.00

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-549**  
 Amount of Each Receipt this Period 42.00  
 Memo Item

**B. Duncan, Drue, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Director, SGR Team and Intern  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-981**  
 Amount of Each Receipt this Period 105.00  
 Memo Item

**C. Duncan, Drue, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Director, SGR Team and Internal  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-977**  
 Amount of Each Receipt this Period 105.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	252.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Duque, Isidro, V, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) US Customer Engagement Product Tra  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-2149**  
 Amount of Each Receipt this Period 26.00  
 Memo Item

**B. Ebner, Shayla, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) Key Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 344.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-1991**  
 Amount of Each Receipt this Period 43.00  
 Memo Item

**C. Ebner, Shayla, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) Key Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 344.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1980**  
 Amount of Each Receipt this Period 43.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	112.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Assistant General Counsel
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2026

**Transaction ID : 2026041612283-1016**

Amount of Each Receipt this Period  
104.17

Memo Item

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Assistant General Counsel
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2026

**Transaction ID : 2026050411243-1012**

Amount of Each Receipt this Period  
104.17

Memo Item

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pharmacia	Occupation (for Individual) Sr. Director- RDM Procurement,
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
206.72

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2026

**Transaction ID : 2026050411243-618**

Amount of Each Receipt this Period  
25.84

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	234.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Englehart, David, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) Area Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.72

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2156**  
 Amount of Each Receipt this Period 25.84  
 Memo Item

**B. Ennis, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) VP & Lead Compl Counsel, US, LATAM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1684**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**C. Ennis, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) VP & Lead Compl Counsel, US, LATAM  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1674**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	442.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Figueroa Gonzalez, Javier, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-615</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Pharmaceuticals LLC	Occupation (for Individual) VP, PX, PGS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Figueroa Gonzalez, Javier, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-613</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Pharmaceuticals LLC	Occupation (for Individual) VP, PX, PGS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. First, Steven, A, ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-2175</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 65.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc.	Occupation (for Individual) Vice President, People Experience, Glo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 520.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	148.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. First, Steven, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) Vice President, People Experience, Glo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-2164**  
 Amount of Each Receipt this Period 65.00  
 Memo Item

**B. Flood, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Business Planning Team Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-841**  
 Amount of Each Receipt this Period 27.00  
 Memo Item

**C. Flores, Brandy, Blaze, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Director, State Government Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-1461**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	196.17
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Flores, Brandy, Blaze, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Director, State Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1453**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

**B. Flowers, Jonelle, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Director, Team Lead Public Affairs (M)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-732**  
 Amount of Each Receipt this Period  
 25.25  
 Memo Item

**C. Floyd, Gilbert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) IM & Antiviral Sales Lead  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 368.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-210**  
 Amount of Each Receipt this Period  
 46.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.42
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Floyd, Gilbert, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-208</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 46.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) IM & Antiviral Sales Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 368.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Fonseca, Lidia, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1467</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Chief Digital & Technology Officer, Ex	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Fonseca, Lidia, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1459</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Chief Digital & Technology Officer, Ex	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 833.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	254.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Forero Uribe, Juan, Fernando, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) VP, Top and Standard Commercial Inte  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-2028**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Forero Uribe, Juan, Fernando, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) VP, Top and Standard Commercial Inte  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2017**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Forsyth, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Field Medical Outcomes Director  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1441**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Forsyth, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Field Medical Outcomes Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1433**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Foster, Niesha, N, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) VP, Product Access  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.12

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-576**  
 Amount of Each Receipt this Period 41.64  
 Memo Item

**C. Foster, Niesha, N, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) VP, Product Access  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.12

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-574**  
 Amount of Each Receipt this Period 41.64  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	124.95
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Fox-Sorcic, Kelli, Annette, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) Solution & Tech Lead, EHS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2171**  
 Amount of Each Receipt this Period 27.00  
 Memo Item

**B. Frenzel, Zachary, Eben, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Sr Scientist Packaging Engineer R&D  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1587**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Frenzel, Zachary, Eben, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Sr Scientist Packaging Engineer R&D  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1578**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	110.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Fuentes, Mario, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1054</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 25.25
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) SHR Level 4	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Garcia, Sean, Stephan, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1673</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Field Medical Outcomes, Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Garcia, Sean, Stephan, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1663</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Field Medical Outcomes, Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 333.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	108.59
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Gavette, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SHR Level 4  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-1451**  
 Amount of Each Receipt this Period  
 41.67  
 Memo Item

**B. Gavette, Andrew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SHR Level 4  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1443**  
 Amount of Each Receipt this Period  
 41.67  
 Memo Item

**C. Gaviria, Francisco, Javier, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SHR Level 4  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-2611**  
 Amount of Each Receipt this Period  
 25.25  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	108.59
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**PFIZER INC. PAC**

**A. Geoly, Frank, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) DSRD Global Pathology Team Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-481**  
 Amount of Each Receipt this Period  
 41.67  
 Memo Item

**B. Geoly, Frank, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) DSRD Global Pathology Team Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-479**  
 Amount of Each Receipt this Period  
 41.67  
 Memo Item

**C. Gerloff, Jerianne, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Director, SGR Team and Externa  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-413**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Gerloff, Jerianne, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Director, SGR Team and Extern  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-411**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Gertzen, Jason, Adam, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Senior Director, Speechwriting and Exe  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1641**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Gertzen, Jason, Adam, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Senior Director, Speechwriting and Exe  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1631**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Gill, Craig, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-414</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 155.05
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Director, State Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1240.40	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Gill, Craig, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-412</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 155.05
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Director, State Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1240.40	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Gill, Jasjit, Singh, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1596</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 208.33
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Field Medical, Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1334.52	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	518.43
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Gill, Jasjit, Singh, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Field Medical, Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1334.52

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1587**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**B. Godfrey, Beverly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Scientist Lab Ops  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-2591**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Godfrey, Beverly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Scientist Lab Ops  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2577**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	291.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Gonzalez-Ramos, Felipe, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-7</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 50.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Pharmaceuticals LLC	Occupation (for Individual) Sr. Director- RDM Procurement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Gonzalez-Ramos, Felipe, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-7</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 50.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Pharmaceuticals LLC	Occupation (for Individual) Sr. Director- RDM Procurement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Goodrich, Amy, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1139</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 105.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) VP Public Affairs and Advocacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 840.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	205.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Goodrich, Amy, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1133</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 105.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) VP Public Affairs and Advocacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 840.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Gordon, Kyra, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1688</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 43.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) HSP Level 1	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 344.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Gordon, Kyra, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1678</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 43.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) HSP Level 1	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 344.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	191.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Gouveia-Pisano, Julie, Ann, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Advanced Medical Engagement
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2026

**Transaction ID : 2026041612283-437**

Amount of Each Receipt this Period  
41.67

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Gouveia-Pisano, Julie, Ann, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Advanced Medical Engagement
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2026

**Transaction ID : 2026050411243-435**

Amount of Each Receipt this Period  
41.67

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Grannis, Laura, Allison, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Director, Head of State Policy
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
848.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2026

**Transaction ID : 2026041612283-976**

Amount of Each Receipt this Period  
106.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	189.34
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Griesing, Teresa, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Head of US Medical Affairs, Senior Vic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-159**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Griesing, Teresa, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Head of US Medical Affairs, Senior Vic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-158**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Grover, Jamie, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) HSP Level 2  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 313.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-601**  
 Amount of Each Receipt this Period 39.21  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	122.55
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Grover, Jamie, M, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-599</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 39.21		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pfizer Inc		Occupation (for Individual) HSP Level 2			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 313.68			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Halstrom, Suzanne, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-2602</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 41.67		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pfizer, Inc		Occupation (for Individual) Retail Pharmacy Team Lead			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.36			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Halstrom, Suzanne, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-2588</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 41.67		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pfizer, Inc		Occupation (for Individual) Retail Pharmacy Team Lead			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 333.36			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	122.55
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Hartley, Garrett, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) National Account Director, Urology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2192**  
 Amount of Each Receipt this Period 27.00  
 Memo Item

**B. Henesey, Caroline, Mary, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) Senior Director, Global Regulatory Str  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 729.19

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-2207**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Hensley, Susan, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) US Patient Solutions Advocacy and Prof  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-381**  
 Amount of Each Receipt this Period 28.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	159.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Hill, Christopher, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Digital Solution Lead - Commercial CFC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-489**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

**B. Hill, Christopher, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Digital Solution Lead - Commercial CFC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-487**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

**C. Hiscoe, Kenneth, Brooks, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Director, State Government Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-982**  
 Amount of Each Receipt this Period  
 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Hiscoe, Kenneth, Brooks, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-978</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Director, State Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Hogan, Timothy, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1572</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 208.33
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) SVP, Global Policy & Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.64	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Hogan, Timothy, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1563</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 208.33
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) SVP, Global Policy & Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1666.64	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	458.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Hovey, Mandee, R, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1926</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 30.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pharmacia & Upjohn Company	Occupation (for Individual) Sales Training and Development Progr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Hovey, Mandee, R, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1915</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 30.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pharmacia & Upjohn Company	Occupation (for Individual) Sales Training and Development Progr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Hoyt, Annemarie, Veronica, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-628</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pharmacia	Occupation (for Individual) HSP Level 3	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 333.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	101.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Hoyt, Annemarie, Veronica, ,</b>		Date of Receipt
Mailing Address 66 Hudson Blvd East		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2026"/>
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2026050411243-626</b>
Name of Employer (for Individual) Pharmacia		Amount of Each Receipt this Period <input type="text" value="41.67"/>
Occupation (for Individual) HSP Level 3		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="333.36"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Hsieh, Lily, , ,</b>		Date of Receipt
Mailing Address 66 Hudson Blvd East		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2026"/>
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2026041612283-537</b>
Name of Employer (for Individual) Pfizer Inc		Amount of Each Receipt this Period <input type="text" value="104.17"/>
Occupation (for Individual) Assoc Director, CII Info Strat		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="833.36"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Hsieh, Lily, , ,</b>		Date of Receipt
Mailing Address 66 Hudson Blvd East		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2026"/>
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2026050411243-535</b>
Name of Employer (for Individual) Pfizer Inc		Amount of Each Receipt this Period <input type="text" value="104.17"/>
Occupation (for Individual) Assoc Director, CII Info Strat		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="833.36"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="250.01"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Jean-Louis, Ramcess, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-2593</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.50
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Chief Diversity, Equity & Inclusion Of	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 836.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Jean-Louis, Ramcess, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-2579</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.50
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Chief Diversity, Equity & Inclusion Of	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 836.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Jean-Pierre, James, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-111</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Account Director, U.S. Payers	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 833.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	313.17
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Jean-Pierre, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Account Director, U.S. Payers  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-110**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Jenson, Julie, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) Director, International Product Donati  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1858**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Jenson, Julie, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) Director, International Product Donati  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1847**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Jewell, Patricia, Fine, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Senior Director, US Oncology Policy &
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2026

**Transaction ID : 2026041612283-333**

Amount of Each Receipt this Period  
41.67

Memo Item

**B. Jewell, Patricia, Fine, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Senior Director, US Oncology Policy &
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2026

**Transaction ID : 2026050411243-331**

Amount of Each Receipt this Period  
41.67

Memo Item

**C. Jones, Joanne, F, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer, Inc.	Occupation (for Individual) Senior Director, Enterprise Technology
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2026

**Transaction ID : 2026041612283-2220**

Amount of Each Receipt this Period  
41.67

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Jones, Joanne, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) Senior Director, Enterprise Technology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2207**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Katyal, Navin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) U.S. Primary Care President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-2060**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Katyal, Navin, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) U.S. Primary Care President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2049**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Kaylor, Donna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Director, State Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-549**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Kaylor, Donna, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Director, State Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-547**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Kelly, Carol, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) Director, Advocacy and Professional Re  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 224.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1971**  
 Amount of Each Receipt this Period 28.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	236.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Ken-Kwofie, Lawrence, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Sr. Director/Team Lead, Contracting De  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1090**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Ken-Kwofie, Lawrence, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Sr. Director/Team Lead, Contracting De  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1085**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Kimbark, J, Craig, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) HSP Level 3  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-196**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 113.34  
**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 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Kimbark, J, Craig, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-194</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 30.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) HSP Level 3	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. King, Malik, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-2598</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 43.05
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) HSP Level 1	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 344.40	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. King, Malik, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-2584</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 43.05
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) HSP Level 1	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 344.40	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	116.10
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Klea, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SHR Level 3  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-1058**  
 Amount of Each Receipt this Period 25.25  
 Memo Item

**B. Kraemer, John, William, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Director and Head of Federal Re  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-1241**  
 Amount of Each Receipt this Period 120.00  
 Memo Item

**C. Kraemer, John, William, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Director and Head of Federal Re  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-1235**  
 Amount of Each Receipt this Period 120.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	265.25
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Krebs, Matthew, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Manager, Alliance Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-405**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**B. Krebs, Matthew, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Manager, Alliance Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-403**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**C. Lagunowich, Nick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) President, Emerging Markets  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-1064**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	520.83
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Lagunowich, Nick, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1059</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc.	Occupation (for Individual) President, Emerging Markets	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Lambert, Michele, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1941</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pharmacia	Occupation (for Individual) Area Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Lambert, Michele, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1930</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pharmacia	Occupation (for Individual) Area Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 333.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Languedoc, Christine, G, ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-140</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 50.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) VP Digital Client Partner - PRD_	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Languedoc, Christine, G, ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-139</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 50.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) VP Digital Client Partner - PRD_	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Lankler, Douglas, M, ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1777</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Chief Legal Officer, Executive Vice Pr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 833.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	204.17
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Lankler, Douglas, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Chief Legal Officer, Executive Vice Pr  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1767**  
 Amount of Each Receipt this Period  
 104.17  
 Memo Item

**B. Lehman, David, Edgar, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Vice President, Political Engagement a  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-1678**  
 Amount of Each Receipt this Period  
 208.33  
 Memo Item

**C. Lehman, David, Edgar, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Vice President, Political Engagement a  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1668**  
 Amount of Each Receipt this Period  
 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	520.83
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Leonard, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Global Access & Value Lead, Senior Vic  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-1633**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**B. Leonard, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Global Access & Value Lead, Senior Vi  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1623**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**C. Lewis, Rebecca, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SHR Level 3  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200.40

Date of Receipt  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1406**  
 Amount of Each Receipt this Period 25.05  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	441.71
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Lewis-Belizaire, Ian, Rashad, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Director, Alliance Development and NY  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **834.00**

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1653**  
 Amount of Each Receipt this Period **104.25**  
 Memo Item

**B. Lewis-Belizaire, Ian, Rashad, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Director, Alliance Development and NY  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **834.00**

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1643**  
 Amount of Each Receipt this Period **104.25**  
 Memo Item

**C. Lopez, Oscar, Hernandez, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Manager Internal Manufacturing Support  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **333.36**

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-2619**  
 Amount of Each Receipt this Period **41.67**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>250.17</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Lopez, Oscar, Hernandez, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Manager Internal Manufacturing Support  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-2605**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Madden, Margaret, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SVP, Corp Secretary, Chief Counsel Go  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-438**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Madden, Margaret, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SVP, Corp Secretary, Chief Counsel Go  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-436**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 151
	<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)  
**PFIZER INC. PAC**

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Chief U.S. Commercial Officer, Executi
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2026

**Transaction ID : 2026041612283-911**

Amount of Each Receipt this Period  
208.33

Memo Item

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Chief U.S. Commercial Officer, Executi
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1666.64

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2026

**Transaction ID : 2026050411243-907**

Amount of Each Receipt this Period  
208.33

Memo Item

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Sr Dir People Experience, Glb Benefits
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
344.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2026

**Transaction ID : 2026041612283-1216**

Amount of Each Receipt this Period  
43.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	459.66
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Manning, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Sr Dir People Experience, Glb Benefits  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 344.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1210**  
 Amount of Each Receipt this Period 43.00  
 Memo Item

**B. Maritato, Anna, Maria, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Director, State Government Rel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1002.00

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-116**  
 Amount of Each Receipt this Period 125.25  
 Memo Item

**C. Maritato, Anna, Maria, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Director, State Government Rela  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1002.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-115**  
 Amount of Each Receipt this Period 125.25  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	293.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 151
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Martin, Eric, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1018</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 46.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Director, Alliance Development and Go	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 368.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Martin, Eric, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1014</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 46.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Director, Alliance Development and Go	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 368.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Massey, Gary, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-917</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Commercial Leadership Training Direct	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 333.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	133.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Massey, Gary, , ,</b>		Date of Receipt
Mailing Address 66 Hudson Blvd East		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2026"/>
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2026050411243-913</b>
Name of Employer (for Individual) Pfizer, Inc		Amount of Each Receipt this Period <input type="text" value="41.67"/>
Occupation (for Individual) Commercial Leadership Training Directr		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="333.36"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Maves, Brian, E, ,</b>		Date of Receipt
Mailing Address 66 Hudson Blvd East		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2026"/>
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2026041612283-263</b>
Name of Employer (for Individual) Pfizer Inc		Amount of Each Receipt this Period <input type="text" value="46.00"/>
Occupation (for Individual) Field Medical Outcomes, Director		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="368.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Maves, Brian, E, ,</b>		Date of Receipt
Mailing Address 66 Hudson Blvd East		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2026"/>
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 2026050411243-261</b>
Name of Employer (for Individual) Pfizer Inc		Amount of Each Receipt this Period <input type="text" value="46.00"/>
Occupation (for Individual) Field Medical Outcomes, Director		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="368.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="133.67"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. McCormick, Cristina, Helena, ,</b>		Date of Receipt MM / DD / YYYY <b>04 / 15 / 2026</b> <b>Transaction ID : 2026041612283-1117</b>
Mailing Address <b>66 Hudson Blvd East</b>		Amount of Each Receipt this Period <b>37.00</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10001</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) <b>Pfizer Inc</b>	Occupation (for Individual) <b>National Advanced Customer Engagem</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>296.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. McCormick, Cristina, Helena, ,</b>		Date of Receipt MM / DD / YYYY <b>04 / 30 / 2026</b> <b>Transaction ID : 2026050411243-1112</b>
Mailing Address <b>66 Hudson Blvd East</b>		Amount of Each Receipt this Period <b>37.00</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10001</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) <b>Pfizer Inc</b>	Occupation (for Individual) <b>National Advanced Customer Engager</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>296.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. McCormick, Peter, Michael, ,</b>		Date of Receipt MM / DD / YYYY <b>04 / 30 / 2026</b> <b>Transaction ID : 2026050411243-2237</b>
Mailing Address <b>66 Hudson Blvd East</b>		Amount of Each Receipt this Period <b>25.84</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10001</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) <b>Pfizer, Inc</b>	Occupation (for Individual) <b>Enterprise SAP Architecture &amp; Technica</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <b>206.72</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>99.84</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 151
	<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)  
**PFIZER INC. PAC**

**A. McDermott, Michael, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) Chief Global Supply and Quality Office  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-2251**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**B. McDermott, Michael, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) Chief Global Supply and Quality Office  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2238**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**C. McGuigan, Peter, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) SVP, Finance, R&D, BI and PGS  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1845**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	520.83
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 151
	<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)  
**PFIZER INC. PAC**

**A. McGuigan, Peter, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) SVP, Finance, R&D, BI and PGS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1834**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. McHugh, Douglas, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) SVP, Digital and Technology PGS Crea  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-2252**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. McHugh, Douglas, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) SVP, Digital and Technology PGS Crea  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2239**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	174.17
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. McRae JR, James, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) US Hospital Sales and Health System L  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-2441**  
 Amount of Each Receipt this Period 26.00  
 Memo Item

**B. Meehan, Matthew, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Director, State Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 341.76

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-545**  
 Amount of Each Receipt this Period 42.72  
 Memo Item

**C. Meehan, Matthew, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Director, State Government Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 341.76

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-543**  
 Amount of Each Receipt this Period 42.72  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	111.44
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Micallef, Ryan, D, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) USMA Senior Director Customer Marke
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-789**

Amount of Each Receipt this Period  
41.67

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Micallef, Ryan, D, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) USMA Senior Director Customer Marke
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-785**

Amount of Each Receipt this Period  
41.67

Memo Item

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Director, U.S. Policy & Public Affairs
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
848.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-1489**

Amount of Each Receipt this Period  
106.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	189.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Morris, Eboni, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Director, U.S. Policy & Public Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 848.00

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-1481**  
 Amount of Each Receipt this Period 106.00  
 Memo Item

**B. Mossbacher, Nicole, I, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Area Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-238**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Mueller, Emily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) VP Federal Policy & Government Relatic  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-1432**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	344.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Mueller, Emily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) VP Federal Policy & Government Relati  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1424**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**B. Muldrew, Tara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Sr Manager Business Operations (Sec  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.80

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1386**  
 Amount of Each Receipt this Period 30.10  
 Memo Item

**C. Muldrew, Tara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Sr Manager Business Operations (Seco  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.80

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1378**  
 Amount of Each Receipt this Period 30.10  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	268.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 151
	<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)  
**PFIZER INC. PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mullane-Robinson, Karen, P, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Senior Manager, Biology Solutions Leac
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
421.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2026

**Transaction ID : 2026041612283-842**

Amount of Each Receipt this Period  
52.67

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mullane-Robinson, Karen, P, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Senior Manager, Biology Solutions Leac
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
421.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2026

**Transaction ID : 2026050411243-838**

Amount of Each Receipt this Period  
52.67

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Muniz, Edilson, Santiago, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) SHR Level 4
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2026

**Transaction ID : 2026041612283-2542**

Amount of Each Receipt this Period  
41.67

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	147.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Muniz, Edison, Santiago, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SHR Level 4  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2528**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Muratore, Andrew, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) VP and Chief Counsel, Strategic Partne  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1029**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Muratore, Andrew, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) VP and Chief Counsel, Strategic Partne  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1025**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Murray, Brian, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Dir, US Market Access Marketing Breas  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1781**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Murray, Brian, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Dir, US Market Access Marketing Breas  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1771**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Mychalowych, Jerome, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SVP, Global Tax  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1039**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	291.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mychalowych, Jerome, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1035</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 208.33
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) SVP, Global Tax	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1666.64	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Nestor, Rachele, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1530</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 50.25
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) SHR Level 3	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 402.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Nestor, Rachele, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1521</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 50.25
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) SHR Level 3	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 402.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	308.83
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Nodarse, Ernesto, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) HSP Level 3  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-442**  
 Amount of Each Receipt this Period  
 25.25  
 Memo Item

**B. Norman, Ryan, Christopher, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Field Medical, Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1571**  
 Amount of Each Receipt this Period  
 25.25  
 Memo Item

**C. Oliverio, Dominick, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Seagen Integration Lead (Interim), Glo  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-5**  
 Amount of Each Receipt this Period  
 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	92.17
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Oliverio, Dominick, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Seagen Integration Lead (Interim), Glo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-5**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Olson, Grant, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Director Public Affairs (M)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 913.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1313**  
 Amount of Each Receipt this Period 114.17  
 Memo Item

**C. Olson, Grant, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Director Public Affairs (M)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 913.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1305**  
 Amount of Each Receipt this Period 114.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	270.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Orr, James, Kevin, ,</b>		Date of Receipt MM / DD / YYYY <b>04 / 15 / 2026</b> <b>Transaction ID : 2026041612283-271</b>
Mailing Address <b>66 Hudson Blvd East</b>		Amount of Each Receipt this Period <b>106.00</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10001</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) <b>Pfizer Inc</b>	Occupation (for Individual) <b>Director, State Government Relations</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>848.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Orr, James, Kevin, ,</b>		Date of Receipt MM / DD / YYYY <b>04 / 30 / 2026</b> <b>Transaction ID : 2026050411243-269</b>
Mailing Address <b>66 Hudson Blvd East</b>		Amount of Each Receipt this Period <b>106.00</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10001</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) <b>Pfizer Inc</b>	Occupation (for Individual) <b>Director, State Government Relations</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>848.00</b>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Pacheco, Ricardo, , ,</b>		Date of Receipt MM / DD / YYYY <b>04 / 30 / 2026</b> <b>Transaction ID : 2026050411243-1654</b>
Mailing Address <b>66 Hudson Blvd East</b>		Amount of Each Receipt this Period <b>26.00</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10001</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) <b>Pfizer, Inc</b>	Occupation (for Individual) <b>Senior Manager, Federal Policy and Go</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <b>208.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>238.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Padbury, Guy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) Head of Clinical Pharmacology & Trans  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1883**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Padbury, Guy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) Head of Clinical Pharmacology & Trans  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1872**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Palacios, Denny, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Vaccines Account Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 882.40

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1821**  
 Amount of Each Receipt this Period 110.30  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	193.64
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Palacios, Denny, F, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Vaccines Account Manager
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
882.40

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2026

**Transaction ID : 2026050411243-1811**

Amount of Each Receipt this Period  
110.30

Memo Item

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Vice President, International Commerci
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2026

**Transaction ID : 2026041612283-1545**

Amount of Each Receipt this Period  
104.17

Memo Item

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Vice President, International Commerci
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
833.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2026

**Transaction ID : 2026050411243-1536**

Amount of Each Receipt this Period  
104.17

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	318.64
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Peart, Marc, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Key Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-1481**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Peart, Marc, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Key Account Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1473**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Perez, Warren, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) SHR Level 4  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-1963**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	291.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Perez, Warren, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) SHR Level 4  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-1952**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

**B. Point, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SrScien'st Toxicology (R)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-1275**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Point, Gary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SrScien'st Toxicology (R)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-1269**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	291.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Poirier, Jason, Rolf, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Global Customer Care Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-2287**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Poirier, Jason, Rolf, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Global Customer Care Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2274**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Pujals, Jeffrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Area Business Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200.40

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-931**  
 Amount of Each Receipt this Period 25.05  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 108.39  
**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 107 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Reddy, Micaela, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Director, Clinical Pharmacology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-2642**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Reddy, Micaela, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Director, Clinical Pharmacology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-2627**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Redman, Daniella, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) Area Business Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1992**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Redman, Daniella, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) Area Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1981**  
 Amount of Each Receipt this Period  
 41.67  
 Memo Item

**B. Reed, Patricia, Ann, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) HSP Level 3  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1662**  
 Amount of Each Receipt this Period  
 25.05  
 Memo Item

**C. Reiche, Sharon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) AGC, Corporate Affairs & Policy, WW L  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-669**  
 Amount of Each Receipt this Period  
 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	108.39
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Reiche, Sharon, , ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-666</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) AGC, Corporate Affairs & Policy, WW L	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Rejto, Paul, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-2003</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 42.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Head of Discovery Technologies	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 341.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Rejto, Paul, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1992</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 42.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Head of Discovery Technologies	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 341.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	127.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 110 OF 151		
	(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)  
**PFIZER INC. PAC**

**A. Relihan, Timothy, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SHR Level 4  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-76**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**B. Relihan, Timothy, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SHR Level 4  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-75**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. Riddle, Morris, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SHR Level 2  
 Receipt For:  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼ 1251.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-858**  
 Amount of Each Receipt this Period  
 1.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	61.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Riddle, Morris, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SHR Level 2  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1251.98

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-854**  
 Amount of Each Receipt this Period 1.00  
 Memo Item

**B. Riley, Lawrence, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Sr. Manager, Business Ops - Vaccine S  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-220**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

**C. Riley, Lawrence, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Sr. Manager, Business Ops - Vaccine S  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-218**  
 Amount of Each Receipt this Period 45.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	91.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Rode Palacios, Margaret, T, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) I&I Field Reimbursement Manager
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
836.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-992**

Amount of Each Receipt this Period  
104.55

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Rode Palacios, Margaret, T, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) I&I Field Reimbursement Manager
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
836.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-988**

Amount of Each Receipt this Period  
104.55

Memo Item

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) VP, Corporate Communications
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-1497**

Amount of Each Receipt this Period  
41.67

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 151
	<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)  
**PFIZER INC. PAC**

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) VP, Corporate Communications
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2026

**Transaction ID : 2026050411243-1489**

Amount of Each Receipt this Period  
41.67

Memo Item

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Global Medical Strategy Lead
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2026

**Transaction ID : 2026041612283-459**

Amount of Each Receipt this Period  
41.67

Memo Item

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Global Medical Strategy Lead
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2026

**Transaction ID : 2026050411243-457**

Amount of Each Receipt this Period  
41.67

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.01
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Russell, Khari, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SHR Level 2  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.80

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1243**  
 Amount of Each Receipt this Period 25.10  
 Memo Item

**B. Sahan Guler, Ozlem, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Advanced Customer Engagement Tear  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 456.68

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1311**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Sahan Guler, Ozlem, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Advanced Customer Engagement Team  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 456.68

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1303**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.10
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Sampson, Najah, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer U.S. Pharmaceuticals Occupation (for Individual) US Internal Medicine Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-232**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**B. Sampson, Najah, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer U.S. Pharmaceuticals Occupation (for Individual) US Internal Medicine Lead  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-230**  
 Amount of Each Receipt this Period 10.00  
 Memo Item

**C. Sanderson, Scott, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) HSP Level 3  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 206.72

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-2290**  
 Amount of Each Receipt this Period 25.84  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.84
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Scott, Mario, Ladel, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Global Customer Engagement Training  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-583**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Scott, Mario, Ladel, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Global Customer Engagement Training  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-581**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Shannon, Karr, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Area Business Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-470**  
 Amount of Each Receipt this Period 105.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	188.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Shannon, Karr, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Area Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 840.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-468**  
 Amount of Each Receipt this Period  
 105.00  
 Memo Item

**B. Shealy, William, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Thought Leader Engagement Liaison  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-453**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

**C. Shealy, William, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Thought Leader Engagement Liaison  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-451**  
 Amount of Each Receipt this Period  
 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	165.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Simmons, Kathryn, Hd, ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-460</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 45.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Area Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Simmons, Kathryn, Hd, ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-458</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 45.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Area Business Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Smith, Desiree, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1194</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 104.17
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) GI MG/IDN Lead Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 833.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	194.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Smith, Desiree, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) GI MG/IDN Lead Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1188**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Smith, Kristin, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) SHR Level 2  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1952**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Smith, Kristin, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pharmacia & Upjohn Company Occupation (for Individual) SHR Level 2  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1941**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	187.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Smith, Matthew, Henson, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Global Research And Developmen Occupation (for Individual) SDSA TA Lead  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1807**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Smith, Matthew, Henson, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Global Research And Developmen Occupation (for Individual) SDSA TA Lead  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1797**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Steinkamp, Gregory, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) National Sales Lead Breast Cancer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 849.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-408**  
 Amount of Each Receipt this Period 106.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	189.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Steinkamp, Gregory, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) National Sales Lead Breast Cancer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 849.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-406**  
 Amount of Each Receipt this Period 106.17  
 Memo Item

**B. Steinwascher, Brian, Keahi, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Senior Corporate Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1661**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Steinwascher, Brian, Keahi, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Senior Corporate Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1651**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	189.51
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Stroia, Matthew, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1550</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 104.17		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pfizer, Inc		Occupation (for Individual) Senior Director, Federal Government R			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 833.36			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Stroia, Matthew, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1541</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 104.17		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pfizer, Inc		Occupation (for Individual) Senior Director, Federal Government R			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 833.36			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Stuart, Paul, C, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-98</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 75.00		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pfizer Inc		Occupation (for Individual) Head, PharmSci Strategic Sourcing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 600.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	283.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Stuart, Paul, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Head, PharmSci Strategic Sourcing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-97**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. Sullivan, Kevin, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SVP, Corporate Audit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-152**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Sullivan, Kevin, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SVP, Corporate Audit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-151**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	158.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 151
	<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)  
**PFIZER INC. PAC**

**A. Swift, Carl, Drake Davidson, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Customer Engagement Learning Effect  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1471**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Swift, Carl, Drake Davidson, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Customer Engagement Learning Effect  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1463**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Terranova, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Customer Engagement Platform Lead -  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-181**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 151
	<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)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Terranova, David, , ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-180</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 41.67		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pfizer Inc		Occupation (for Individual) Customer Engagement Platform Lead -			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 333.36			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Terry, Myron, K, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-577</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 208.33		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pfizer Inc		Occupation (for Individual) Senior Director, Political Outreach			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1666.64			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Terry, Myron, K, ,</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-575</b>		
Mailing Address 66 Hudson Blvd East			Amount of Each Receipt this Period 208.33		
City New York	State NY	Zip Code 10001	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C					
Name of Employer (for Individual) Pfizer Inc		Occupation (for Individual) Senior Director, Political Outreach			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1666.64			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	458.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Thompson, Chris, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Specialty Care Access & Reimburseme  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-1743**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Thompson, Chris, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Specialty Care Access & Reimburseme  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt 04 / 30 / 2026  
**Transaction ID : 2026050411243-1733**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Thompson, James, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) HSP Level 4  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 15 / 2026  
**Transaction ID : 2026041612283-391**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	113.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Thompson, James, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) HSP Level 4  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-389**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. Thompson, Jeanette, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) US CE Primary Care Product Training I  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-410**  
 Amount of Each Receipt this Period 26.00  
 Memo Item

**C. Thorne, Alan, Bernard, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Key Account Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-556**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	97.67
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Thorne, Alan, Bernard, ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-554</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Key Account Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Torres-Figueroa, Ernesto, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-1732</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Global Manufacturing-US	Occupation (for Individual) Director, PX, GWE, Physical Risk Mitig	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Torres-Figueroa, Ernesto, , ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-1722</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Global Manufacturing-US	Occupation (for Individual) Director, PX, GWE, Physical Risk Mitig	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 333.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Turner, James, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-95</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 55.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Director, PX, GWE, Operations Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Turner, James, A, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 30 / 2026 <b>Transaction ID : 2026050411243-94</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 55.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Director, PX, GWE, Operations Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Underwood, Kadidia, C, ,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 04 / 15 / 2026 <b>Transaction ID : 2026041612283-606</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 45.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Rare Disease KAM Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 360.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	155.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Underwood, Kadidia, C, ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-604</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 45.00
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Rare Disease KAM Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Vacca, John, D, ,</b>		Date of Receipt MM / DD / YYYY 04 / 15 / 2026 <b>Transaction ID : 2026041612283-480</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Global Research And Developmen	Occupation (for Individual) SDSA TA Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 333.36	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Vacca, John, D, ,</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2026 <b>Transaction ID : 2026050411243-478</b>
Mailing Address 66 Hudson Blvd East		Amount of Each Receipt this Period 41.67
City New York	State NY	Zip Code 10001
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Pfizer Global Research And Developmen	Occupation (for Individual) SDSA TA Lead	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 333.36	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	128.34
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Wagner, Tammy, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) GCET - Training (Secondment)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1078**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Wagner, Tammy, Marie, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) GCET - Training (Secondment)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1073**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Walton, Jennifer, Swenson, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SVP US Policy & Government Relations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1125**  
 Amount of Each Receipt this Period 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	291.67
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Walton, Jennifer, Swenson, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) SVP US Policy & Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1120**  
 Amount of Each Receipt this Period  
 208.33  
 Memo Item

**B. Wang, Raechy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Head of Global Commercial Analytics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 853.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-1047**  
 Amount of Each Receipt this Period  
 208.33  
 Memo Item

**C. Wang, Raechy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Head of Global Commercial Analytics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 853.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1043**  
 Amount of Each Receipt this Period  
 208.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	624.99
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Ward-Timko, Heidi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SHR Level 3  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1574**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**B. Ward-Timko, Heidi, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SHR Level 3  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1565**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

**C. Warne, Nicholas, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Head, Pharmaceutical R&D  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-2338**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 151
	<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)  
**PFIZER INC. PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Warne, Nicholas, W, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Pfizer, Inc.	Occupation (for Individual) Head, Pharmaceutical R&D
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2026

**Transaction ID : 2026050411243-2325**

Amount of Each Receipt this Period  
41.67

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wasunna, Jacqueline, Angela Amondi, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) VP and Chief Counsel, Corporate Affair
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2026

**Transaction ID : 2026041612283-896**

Amount of Each Receipt this Period  
41.67

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Wasunna, Jacqueline, Angela Amondi, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) VP and Chief Counsel, Corporate Affair
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2026

**Transaction ID : 2026050411243-892**

Amount of Each Receipt this Period  
41.67

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.01
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Weaver, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc. Occupation (for Individual) Sr. Director, Quality Management System  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-2329**  
 Amount of Each Receipt this Period 26.00  
 Memo Item

**B. Weigel, Douglas, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Area Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-502**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. Weigel, Douglas, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Area Business Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-500**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	86.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Wiles, Angela, Boothe, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Senior Director, Federal Government R  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1619**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**B. Wiles, Angela, Boothe, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) Senior Director, Federal Government R  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 833.36

Date of Receipt **04 / 30 / 2026**  
**Transaction ID : 2026050411243-1610**  
 Amount of Each Receipt this Period 104.17  
 Memo Item

**C. Williams, Naomi, Lynn, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66 Hudson Blvd East  
 City New York State NY Zip Code 10001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Pfizer, Inc Occupation (for Individual) SHR Level 2  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 333.36

Date of Receipt **04 / 15 / 2026**  
**Transaction ID : 2026041612283-1665**  
 Amount of Each Receipt this Period 41.67  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 151
	<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)  
**PFIZER INC. PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Williams, Naomi, Lynn, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) SHR Level 2
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2026

**Transaction ID : 2026050411243-1655**

Amount of Each Receipt this Period  
41.67

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Willis, E, Elaine, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Retail Pharmacy Account Manager
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
833.34

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2026

**Transaction ID : 2026041612283-350**

Amount of Each Receipt this Period  
208.33

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Willis, E, Elaine, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Retail Pharmacy Account Manager
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
833.34

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2026

**Transaction ID : 2026050411243-348**

Amount of Each Receipt this Period  
208.33

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	458.33
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Director, Alliance Development and Sta
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
836.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-1651**

Amount of Each Receipt this Period  
104.50

Memo Item

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

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer, Inc	Occupation (for Individual) Director, Alliance Development and Sta
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
836.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2026  
**Transaction ID : 2026050411243-1641**

Amount of Each Receipt this Period  
104.50

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Zincone, Michael, J, ,

Mailing Address 66 Hudson Blvd East

City New York	State NY	Zip Code 10001
------------------	-------------	-------------------

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

Name of Employer (for Individual) Pfizer Inc	Occupation (for Individual) Senior Director, Patient Advocacy
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
248.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 15 / 2026  
**Transaction ID : 2026041612283-1759**

Amount of Each Receipt this Period  
31.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	240.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 151
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Zincone, Michael, J, ,

Mailing Address 66 Hudson Blvd East

City New York State NY Zip Code 10001

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

Name of Employer (for Individual) Pfizer Inc Occupation (for Individual) Senior Director, Patient Advocacy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
248.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2026

**Transaction ID : 2026050411243-1749**

Amount of Each Receipt this Period  
31.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	31.00
<b>TOTAL</b> This Period (last page this line number only).....	29615.24

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
PFIZER INC. PAC

Form A: Andrea Salinas For Oregon. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: Carol For Congress. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: Castor For Congress. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 3000.00
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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Friends Of Todd Young, Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 3743

City Carmel State IN Zip Code 46082-3743

Purpose of Disbursement  
2028 General

Candidate Name  
Young, Todd, , ,

Office Sought:  House  Senate  President  
State: IN District:

Disbursement For: 2028  
 Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
04 / 15 / 2026

FEC Identification Number  
C00459255  
Transaction ID : EDC662E910

Amount of Each Disbursement this Period  
2500.00

Memo Item

**B. Gallego For Arizona**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1710

City Phoenix State AZ Zip Code 85001-1710

Purpose of Disbursement  
2030 Primary

Candidate Name  
Gallego, Ruben, , ,

Office Sought:  House  Senate  President  
State: AZ District:

Disbursement For: 2030  
 Primary  General  Other (specify)

Date of Disbursement  
MM / DD / YYYY  
04 / 15 / 2026

FEC Identification Number  
C00558627  
Transaction ID : 190FD8000D5

Amount of Each Disbursement this Period  
1000.00

Memo Item

**C. Gillen For Ny**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 774

City Rockville Centre State NY Zip Code 11571-0774

Purpose of Disbursement  
2026 Primary

Candidate Name  
Gillen, Laura, , ,

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

Disbursement For: 2026  
 Primary  General  Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
04 / 15 / 2026

FEC Identification Number  
C00840165  
Transaction ID : 5B660A3DA8

Amount of Each Disbursement this Period  
1000.00

Memo Item

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Hudson For Congress**

Mailing Address PO Box 1875

City  
Southern Pines

State  
NC

Zip Code  
28388-1875

Purpose of Disbursement  
2026 General

011

Candidate Name

Hudson, Richard, , , Jr.

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

State: NC District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	6

FEC Identification Number

C C00504522

Transaction ID : FED64C8AE5

Amount of Each Disbursement this Period

2	5	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**B. Husted For Senate**

Mailing Address PO Box 6290

City  
Columbus

State  
OH

Zip Code  
43206-0290

Purpose of Disbursement  
2026 General

011

Candidate Name

Husted, Jon, , ,

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2026  
 Primary  General  
 Other (specify)

State: OH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	6

FEC Identification Number

C C00896019

Transaction ID : DBAC0638A7

Amount of Each Disbursement this Period

2	5	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

**C. Juntos PAC**

Mailing Address 600 Pennsylvania Ave SE  
Unit 15180

City  
Washington

State  
DC

Zip Code  
20003-7508

Purpose of Disbursement  
2026 Contribution

011

Candidate Name

Juntos PAC

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼  
Contribution

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	6

FEC Identification Number

C C00892752

Transaction ID : 7A66C68E87

Amount of Each Disbursement this Period

1	5	0	0	0	0
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Memo Item

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

6	5	0	0	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

6	5	0	0	0	0
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
PFIZER INC. PAC

Form A: Kristen For Michigan. Includes fields for Name, Address, Date of Disbursement (04/15/2026), FEC ID (C00864207), Transaction ID (8D33908FE9), and Amount (1000.00).

Form B: LaHood for Congress. Includes fields for Name, Address, Date of Disbursement (04/15/2026), FEC ID (C00575050), Transaction ID (E1F4C141474), and Amount (1500.00).

Form C: Leadership And Accountability Are National Keys PAC. Includes fields for Name, Address, Date of Disbursement (04/15/2026), FEC ID (C00492058), Transaction ID (1A2A047247), and Amount (2500.00).

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)

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

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NAME OF COMMITTEE (In Full)
PFIZER INC. PAC

A. Lisa Blunt Rochester For Senate

Mailing Address PO Box 9767

City Wilmington State DE Zip Code 19809-0767

Purpose of Disbursement 2030 Primary

Candidate Name Blunt Rochester, Lisa, , ,

Office Sought: Senate Disbursement For: 2030 Primary

Date of Disbursement 04 / 15 / 2026

FEC Identification Number C00843391 Transaction ID : 171C0295815 Amount of Each Disbursement this Period 1500.00

Memo Item

B. Luz Rivas For Congress

Mailing Address PO Box 341533

City Arleta State CA Zip Code 91334-1533

Purpose of Disbursement 2026 Primary

Candidate Name Rivas, Luz, , ,

Office Sought: Senate Disbursement For: 2026 Primary

Date of Disbursement 04 / 15 / 2026

FEC Identification Number C00857417 Transaction ID : 248EDD25B1 Amount of Each Disbursement this Period 1000.00

Memo Item

C. Max Miller For Congress

Mailing Address 19525 Hilliard Blvd Unit 16010

City Rocky River State OH Zip Code 44116-4700

Purpose of Disbursement 2026 General

Candidate Name Miller, Max, , ,

Office Sought: House Disbursement For: 2026 General

Date of Disbursement 04 / 15 / 2026

FEC Identification Number C00770818 Transaction ID : 9338C91C13 Amount of Each Disbursement this Period 500.00

Memo Item

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

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

3000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial) <b>A. Max Miller For Congress</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2026
Mailing Address 19525 Hilliard Blvd Unit 16010		FEC Identification Number C C00770818 <b>Transaction ID : D7FB5E4C0A</b>
City Rocky River	State OH	Zip Code 44116-4700
Purpose of Disbursement 2026 Primary	Category/Type 011	
Candidate Name Miller, Max, , ,	Amount of Each Disbursement this Period 2000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 07	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. McClainforcongresssc</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2026
Mailing Address PO Box 61		FEC Identification Number C C00922120 <b>Transaction ID : 34A41D541C!</b>
City Spartanburg	State SC	Zip Code 29304-0061
Purpose of Disbursement 2026 Primary	Category/Type 011	
Candidate Name McClain, Courtney, , ,	Amount of Each Disbursement this Period 1000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SC District: 04	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Mrvan For Congress</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2026
Mailing Address PO Box 55		FEC Identification Number C C00727529 <b>Transaction ID : 2949F9BC08</b>
City Crown Point	State IN	Zip Code 46308-0055
Purpose of Disbursement 2026 Primary	Category/Type 011	
Candidate Name Mrvan, Frank, , ,	Amount of Each Disbursement this Period 2000.00	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2026 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 01	<input type="checkbox"/> Memo Item	

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Nevadans For Steven Horsford**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 336664

City North Las Vegas State NV Zip Code 89033-6664

Purpose of Disbursement 2026 Primary

Candidate Name Horsford, Steven, , ,

Office Sought:  House  Senate  President

Disbursement For: 2026  Primary  General  Other (specify) ▼

State: NV District: 04

Date of Disbursement: 04 / 15 / 2026

FEC Identification Number: C00668228  
**Transaction ID : C2E937639FE**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. Pete Ricketts For Senate**

Full Name (Last, First, Middle Initial)  
Mailing Address 11235 Davenport St Ste 107

City Omaha State NE Zip Code 68154-2690

Purpose of Disbursement 2026 Primary

Candidate Name Ricketts, Pete, , ,

Office Sought:  House  Senate  President

Disbursement For: 2026  Primary  General  Other (specify) ▼

State: NE District:

Date of Disbursement: 04 / 15 / 2026

FEC Identification Number: C00832436  
**Transaction ID : 02B77EC362E**

Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. Robert Garcia For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address 68 W St NW

City Washington State DC Zip Code 20001-1014

Purpose of Disbursement 2026 Primary

Candidate Name Garcia, Robert, , ,

Office Sought:  House  Senate  President

Disbursement For: 2026  Primary  General  Other (specify) ▼

State: CA District: 42

Date of Disbursement: 04 / 15 / 2026

FEC Identification Number: C00797795  
**Transaction ID : 32985371F2F**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

**A. Ron Estes For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 782952

City Wichita State KS Zip Code 67278-2952

Purpose of Disbursement: 2026 Primary  
Candidate Name: Estes, Ron, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2026  Primary  General  Other (specify) ▼  
State: KS District: 04

Date of Disbursement: 04 / 15 / 2026

FEC Identification Number: C00632067  
Transaction ID : FDDC75A02A  
Amount of Each Disbursement this Period: 1000.00  
 Memo Item

**B. The Pat Harrigan Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 97275

City Raleigh State NC Zip Code 27624-7275

Purpose of Disbursement: 2026 General  
Candidate Name: Harrigan, Pat, , ,  
Office Sought:  House  Senate  President  
Disbursement For: 2026  Primary  General  Other (specify) ▼  
State: NC District: 10

Date of Disbursement: 04 / 15 / 2026

FEC Identification Number: C00802298  
Transaction ID : ODA35317819  
Amount of Each Disbursement this Period: 2500.00  
 Memo Item

**C. Turquoise PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 611 Pennsylvania Ave SE # 143

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement: 2026 Contribution  
Candidate Name: Turquoise PAC  
Office Sought:  House  Senate  President  
Disbursement For: 2026  Primary  General  Other (specify) Contribution  
State: District:

Date of Disbursement: 04 / 15 / 2026

FEC Identification Number: C00517235  
Transaction ID : 701026AFB3  
Amount of Each Disbursement this Period: 2000.00  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5500.00

**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)

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

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NAME OF COMMITTEE (In Full)
PFIZER INC. PAC

Form A: Votevets. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, and FEC Identification Number.

Form B: Votevets. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, and FEC Identification Number.

Form C: Win The House Now PAC. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, and FEC Identification Number.

SUBTOTAL of Disbursements This Page (optional) and 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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PFIZER INC. PAC**

Full Name (Last, First, Middle Initial)

**A. Womack For Congress Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		15		2026

Mailing Address PO Box 508

FEC Identification Number

C	C00477745
---	-----------

City Rogers State AR Zip Code 72757-0508

**Transaction ID : 89C3937BB8:**  
Amount of Each Disbursement this Period

Purpose of Disbursement 2026 General  
Candidate Name Womack, Steve, , ,  
Office Sought:  House  Senate  President  
State: AR District: 03  
Disbursement For: 2026  
 Primary  General  
 Other (specify) ▼

011
Category/ Type

5000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

FEC Identification Number

C	
---	--

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement  
Candidate Name  
Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/ Type

--

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

FEC Identification Number

C	
---	--

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement  
Candidate Name  
Office Sought:  House  Senate  President  
State: District:  
Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/ Type

--

Memo Item

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

5000.00
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**TOTAL** This Period (last page this line number only).....▶

60500.00
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