

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1 / 14
10/13/2000 18 : 33

1. NAME OF COMMITTEE (in full) AMGEN INC POLITICAL ACTION COMMITTEE		2. FEC IDENTIFICATION NUMBER C00251876
ADDRESS (number and street) ONE AMGEN CENTER DRIVE	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE THOUSAND OAKS CA 91320		3. <input type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Termination report
- Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding _____
(election type) _____
election on _____ In the State of _____
- Thirtieth day report following the General Election
on _____ In the State of _____
- (b) Is this Report an Amendment YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>07/01/2000</u> through <u>09/30/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u>		23639.25
(b) Cash on Hand at Beginning of Reporting Period	27442.02	
(c) Total Receipts (from line 19)	30172.50	77610.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	57615.42	101249.75
7. Total Disbursements (from line 30)	21601.75	65326.08
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	35923.67	35923.67
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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 Electronically Filed by FREDERICK WOO	
Signature of Treasurer	Date 10/13/2000

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

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FEC FORM 3X
(revised 9/98)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE AMGEN INC POLITICAL ACTION COMMITTEE		REPORT COVERING PERIOD		
		FROM 07/01/2000	TO: 09/30/2000	
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:				
a. Individual/Persons Other Than Political Committees				
i. Itemized (use Schedule A)	15335.00	33166.00	11.a.i.	
ii. Unitemized	13837.50	43444.50	11.a.ii.	
iii. Total	29172.50	76610.50	11.a.iii.	
b. Political Party Committees	0.00	0.00	11.b.	
c. Other Political Committees (such as PACs)	0.00	0.00	11.c.	
d. Total Contributions	29172.50	76610.50	11.d.	
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12.	
13. All Loans Received	0.00	0.00	13.	
14. Loan Repayments Received	0.00	0.00	14.	
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15.	
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	1000.00	1000.00	16.	
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17.	
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.	
19. Total Receipts	30172.50	77610.50	19.	
20. Total Federal Receipts	30172.50	77610.50	20.	
II. Disbursements				
21. Operating Expenditures:				
a. Shared Federal/Non-Federal Activity (from Schedule H4)				
i. Federal Share	0.00	0.00	21.a.i.	
ii. Non-Federal Share	0.00	0.00	21.a.ii.	
b. Other Federal Operating Expenditures	0.00	0.00	21.b.	
c. Total Operating Expenditures	0.00	0.00	21.c.	
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.	
23. Contributions to Federal Candidates/Committees and Other Political Committees	21891.75	84151.75	23.	
24. Independent Expenditures (use Schedule E)	0.00	0.00	24.	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.	
26. Loan Repayments Made	0.00	0.00	26.	
27. Loans Made	0.00	0.00	27.	
28. Refunds of Contributions To:				
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28.a.	
b. Political Party Committees	0.00	0.00	28.b.	
c. Other Political Committees (such as PACs)	0.00	0.00	28.c.	
d. Total Contributions Refunds	0.00	0.00	28.d.	
29. Other Disbursements	0.00	1134.33	29.	
30. Total Disbursements	21691.75	85326.08	30.	
31. Total Federal Disbursements	21891.75	85326.08	31.	
III. Net Contributions / Operating Expenditures				
32. Total Contributions (other than loans) (from line 11d)	29172.50	76610.50	32.	
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.	
34. Net Contributions (other than loans) (subtract line 33 from 32)	29172.50	76610.50	34.	
35. Total Federal Operating Expenditures	0.00	0.00	35.	
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.	
37. Net Operating Expenditures	0.00	0.00	37.	

SCHEDULE A		ITEMIZED RECEIPTS		3 / 14
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A1
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) AMGEN INC POLITICAL ACTION COMMITTEE				
Full Name, Mailing Address, and ZIP Code MADHAVAN BALACHANDRAN 2320 GILLINGHAM CIRCLE THOUSAND OAKS CA 91362 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC. Occupation SR DIRECTOR ENG OP SVGES Aggregate Year-to-Date > \$ 315.00	Date (month, day, year) 09/30/2000 Payroll deduction - \$25 semi-monthly	Amount of Each Receipt this Period 150.00	
Full Name, Mailing Address, and ZIP Code DAVID BENGSTON 7273 SPRING CREEK CIRCLE NIWOT CO 80503 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC. Occupation SR DIR CO SITE HEAD Aggregate Year-to-Date > \$ 230.00	Date (month, day, year) 09/30/2000 Payroll deduction - \$20 semi-monthly	Amount of Each Receipt this Period 110.00	
Full Name, Mailing Address, and ZIP Code STANLEY M. BENSON 5603 GREY FEATHER CT. WESTLAKE VILLAGE CA 91362 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC. Occupation SR VP SALES & MARKETING Aggregate Year-to-Date > \$ 720.00	Date (month, day, year) 09/30/2000 Payroll deduction - \$40 semi-monthly	Amount of Each Receipt this Period 240.00	
Full Name, Mailing Address, and ZIP Code EDWARD E. BJURSTROM 31875 SADDLE TREE DRIVE WESTLAKE VILLAGE CA 91361 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC. Occupation VP MANUFACTURING Aggregate Year-to-Date > \$ 1800.00	Date (month, day, year) 09/30/2000 Payroll deduction - \$100 semi-monthly	Amount of Each Receipt this Period 800.00	
Full Name, Mailing Address, and ZIP Code FABRIZIO BONANNI 343 S. BEVERLY GLEN LOS ANGELES CA 90024 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC. Occupation SR VP QUALITY & COMPLIANCE Aggregate Year-to-Date > \$ 560.00	Date (month, day, year) 09/30/2000 Payroll deduction - \$40 semi-monthly	Amount of Each Receipt this Period 240.00	
Full Name, Mailing Address, and ZIP Code CRAIG L. BROOKS 2467 SWANFIELD CT. THOUSAND OAKS CA 91361 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC. Occupation VP ASIA PACIFIC/LATIN AMERICA Aggregate Year-to-Date > \$ 720.00	Date (month, day, year) 09/30/2000 Payroll deduction - \$40 semi-monthly	Amount of Each Receipt this Period 240.00	
Full Name, Mailing Address, and ZIP Code DAVID F. BUSHNELL 2780 MORGAN STREET WEST LINN OR 97068 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC. Occupation PROF. SALES REP. Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 09/30/2000 Payroll deduction - \$15 semi-monthly	Amount of Each Receipt this Period 80.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page		4 / 14	
						FOR LINE NUMBER 11A1	
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NAME OF COMMITTEE (In Full) AMGEN INC POLITICAL ACTION COMMITTEE							
Full Name, Mailing Address, and ZIP Code ROBIN D. CAMPBELL 822 PREAKNESS PLACE NEWBURY PARK CA 91320 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation VP ONCOLOGY Aggregate Year-to-Date > \$ 720.00		Date (month, day, year) 09/30/2000 Payroll deduction - \$40 semi-monthly		Amount of Each Receipt this Period 240.00	
Full Name, Mailing Address, and ZIP Code KATHRYN A. CAUDELL P.O. BOX 1629 EDGEWOOD NM 87015 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation CLINICAL RESEARCH & ED. MGR Aggregate Year-to-Date > \$ 270.00		Date (month, day, year) 09/30/2000 Payroll deduction - \$15 semi-monthly		Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code BRETT O. COOPER 1525 CAMINO AMPARO N. ALBUQUERQUE NM 87107 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation DISTRICT SALES MGR Aggregate Year-to-Date > \$ 220.00		Date (month, day, year) 09/30/2000 Payroll deduction - \$15 semi-monthly		Amount of Each Receipt this Period 80.00	
Full Name, Mailing Address, and ZIP Code DALE ROSE DAVIS 619 WILSHIRE PLACE NEWBURY PARK CA 91320 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation CLINICAL RESEARCH ASSOCIATE Aggregate Year-to-Date > \$ 225.00		Date (month, day, year) 09/30/2000 Payroll deduction - \$25 semi-monthly		Amount of Each Receipt this Period 150.00	
Full Name, Mailing Address, and ZIP Code MICHAEL R. DOWNING 12095 CLINTON STREET MOORPARK CA 93021 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation SR DIRECTOR PRODUCT DEVELOPMENT Aggregate Year-to-Date > \$ 450.00		Date (month, day, year) 09/30/2000 Payroll deduction - \$25 semi-monthly		Amount of Each Receipt this Period 150.00	
Full Name, Mailing Address, and ZIP Code RICHARD F. EAGLE, Jr. 4707 WINNETKA CT. NE ALBUQUERQUE NM 87111 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation PROF. SALES REP. Aggregate Year-to-Date > \$ 250.00		Date (month, day, year) 09/30/2000 Payroll deduction - \$15 semi-monthly		Amount of Each Receipt this Period 50.00	
Full Name, Mailing Address, and ZIP Code KATHRYN E. FALBERG 910 ALEEDA LANE SANTA BARBARA CA 93108 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation SR VP & CFO Aggregate Year-to-Date > \$ 1350.00		Date (month, day, year) 09/30/2000 Payroll deduction - \$75 semi-monthly		Amount of Each Receipt this Period 450.00	
SUBTOTALS of Receipts This Page (Optional)							
TOTALS This Period (last page this line number only)							

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	5 / 14
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
AMGEN INC POLITICAL ACTION COMMITTEE

Full Name, Mailing Address, and ZIP Code DENNIS M. FENTON 1242 HERITAGE PLACE WESTLAKE VILLAGE CA 91362 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$75 semi-monthly	Amount of Each Receipt this Period 450.00
	Occupation SR VP OPERATIONS	Aggregate Year-to-Date > \$ 1125.00	
Full Name, Mailing Address, and ZIP Code EDWARD F. GARNETT 5037 LAKEVIEW CANYON ROAD WESTLAKE VILLAGE CA 91362 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$40 semi-monthly	Amount of Each Receipt this Period 240.00
	Occupation VP HUMAN RESOURCES	Aggregate Year-to-Date > \$ 720.00	
Full Name, Mailing Address, and ZIP Code CINDY L. GILBERT 7746 FIVE POINTS ROAD INDIANAPOLIS IN 46256 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$15 semi-monthly	Amount of Each Receipt this Period 90.00
	Occupation PROF. SALES REP.	Aggregate Year-to-Date > \$ 270.00	
Full Name, Mailing Address, and ZIP Code DAVID A. GOODKIN 358 WOODLET WAY THOUSAND OAKS CA 91361 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll contribution - \$25 semi-monthly	Amount of Each Receipt this Period 150.00
	Occupation VP CLINICAL RESEARCH	Aggregate Year-to-Date > \$ 225.00	
Full Name, Mailing Address, and ZIP Code KERRY A. HAGGERTY 1112 WOODRIDGE AVENUE THOUSAND OAKS CA 91362 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$20 semi-monthly	Amount of Each Receipt this Period 120.00
	Occupation MGR CLINICAL SAFETY	Aggregate Year-to-Date > \$ 360.00	
Full Name, Mailing Address, and ZIP Code THOMAS A. HARDY 3023 CHARLOTTE STREET NEWBURY PARK CA 91320 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$20 semi-monthly	Amount of Each Receipt this Period 120.00
	Occupation DIRECTOR FINANCE ADMINISTRATION	Aggregate Year-to-Date > \$ 360.00	
Full Name, Mailing Address, and ZIP Code STEPHEN J. HARRIS ONE AMGEN CENTER DRIVE THOUSAND OAKS CA 91320 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$25 semi-monthly	Amount of Each Receipt this Period 150.00
	Occupation PROF. SALES REP.	Aggregate Year-to-Date > \$ 350.00	

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	6 / 14
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
AMGEN INC POLITICAL ACTION COMMITTEE

Full Name, Mailing Address, and ZIP Code JOHN F. HAURY 1668 SPRINGHAVEN THOUSAND OAKS CA 91320 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$20 semi-monthly	Amount of Each Receipt this Period 120.00
	Occupation QUALITY ENGINEER	Aggregate Year-to-Date > \$ 360.00	
Full Name, Mailing Address, and ZIP Code L. ROBERT HILL 505 WINDSWEPT PLACE SIMI VALLEY CA 93085 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$25 semi-monthly	Amount of Each Receipt this Period 150.00
	Occupation MGR BIOSTATISTICS	Aggregate Year-to-Date > \$ 450.00	
Full Name, Mailing Address, and ZIP Code MICHAEL W. HUGHES 12670 ANDALUSIA DRIVE CAMARILLO CA 93012 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$40 semi-monthly	Amount of Each Receipt this Period 240.00
	Occupation ASSOCIATE DIRECTOR INFORMATION SERVICE	Aggregate Year-to-Date > \$ 680.00	
Full Name, Mailing Address, and ZIP Code PAMELA HUNT 3586 AVENIDA MONTUOSO THOUSAND OAKS CA 91362 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$25 semi-monthly	Amount of Each Receipt this Period 150.00
	Occupation SR DIRECTOR PRODUCT DEVELOPMENT	Aggregate Year-to-Date > \$ 450.00	
Full Name, Mailing Address, and ZIP Code CAROLINE A. JEWETT 3404 WILLIAM DRIVE NEWBURY PARK CA 91320 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$20 semi-monthly	Amount of Each Receipt this Period 120.00
	Occupation SR MANAGER MFG	Aggregate Year-to-Date > \$ 340.00	
Full Name, Mailing Address, and ZIP Code VAUGHN Q. JOHNSON ONE AMGEN CENTER DRIVE THOUSAND OAKS CA 91320 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$25 semi-monthly	Amount of Each Receipt this Period 150.00
	Occupation PROF. SALES REP.	Aggregate Year-to-Date > \$ 370.00	
Full Name, Mailing Address, and ZIP Code E. RICHARD KEBLAR 2948 MAYFAIR COURT CLEARWATER FL 33125 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$15 semi-monthly	Amount of Each Receipt this Period 80.00
	Occupation PROF. SALES REP.	Aggregate Year-to-Date > \$ 250.00	

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

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			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
AMGEN INC POLITICAL ACTION COMMITTEE

Full Name, Mailing Address, and ZIP Code GLEN G. LAWRENCE 3439 INDIAN RIDGE CIRCLE THOUSAND OAKS CA 91362 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$25 semi-monthly	Amount of Each Receipt this Period 150.00
	Occupation ASSOCIATE DIRECTOR PHARMACEUTICS		
	Aggregate Year-to-Date > \$ 315.00		
Full Name, Mailing Address, and ZIP Code KEITH R. LEONARD, Jr. 1767 MESA RIDGE AVENUE WESTLAKE VILLAGE CA 91362 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$40 semi-monthly	Amount of Each Receipt this Period 240.00
	Occupation SR DIRECTOR BUSINESS INFO & OPS		
	Aggregate Year-to-Date > \$ 560.00		
Full Name, Mailing Address, and ZIP Code JAMES M. LOCKEMY ONE AMGEN CENTER DRIVE THOUSAND OAKS CA 91320 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$15 semi-monthly	Amount of Each Receipt this Period 80.00
	Occupation PROF. SALES REP.		
	Aggregate Year-to-Date > \$ 230.00		
Full Name, Mailing Address, and ZIP Code MARGARET A. LOWERY 751 E. WOODBURY ROAD ALTADENA CA 91001 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$25 semi-monthly	Amount of Each Receipt this Period 150.00
	Occupation ASSOCIATE DIRECTOR INTEGR MKTG		
	Aggregate Year-to-Date > \$ 450.00		
Full Name, Mailing Address, and ZIP Code SUSAN G. MAHALICK 3123 E. HILLCREST DRIVE THOUSAND OAKS CA 91362 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$20 semi-monthly	Amount of Each Receipt this Period 120.00
	Occupation MGR HR		
	Aggregate Year-to-Date > \$ 360.00		
Full Name, Mailing Address, and ZIP Code ELIZABETH MALKERSON 6471 ZUME VIEW PLACE, #151 MALIBU CA 90265 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 07/16/2000 CASH CONTRIBUTION	Amount of Each Receipt this Period 500.00
	Occupation VP CORPORATE COMMUNICATIONS		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code MICHAEL B. MANN 518 W. GAINSBOROUGH THOUSAND OAKS CA 91360 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$25 semi-monthly	Amount of Each Receipt this Period 150.00
	Occupation PROCESS DEV. SCIENTIST		
	Aggregate Year-to-Date > \$ 450.00		

SUBTOTALS of Receipts This Page (Optional)

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NAME OF COMMITTEE (In Full)
AMGEN INC POLITICAL ACTION COMMITTEE

Full Name, Mailing Address, and ZIP Code KARIN J. MITCHELL 6048 49TH AVENUE SW SEATTLE WA 98136	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 90.00 Payroll deposit - \$15 semi-monthly
	Occupation CLINICAL SUPPORT SPECIALIST		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 270.00
Full Name, Mailing Address, and ZIP Code GEORGE MORSTYN 964 BRIGHT STAR THOUSAND OAKS CA 91380	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 240.00 Payroll deduction - \$40 semi-monthly
	Occupation SR VP DEVELOPMENT & CMO		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 2720.00
Full Name, Mailing Address, and ZIP Code MICHAEL A. NARACHI 785 OAK GROVE MONTECITO CA 93108	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 300.00 Payroll deduction - \$50 semi-monthly
	Occupation VP NEPHROLOGY		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 900.00
Full Name, Mailing Address, and ZIP Code JOHN R. NELLIS 3509 WYNDAM LANE ROCHESTER HILLS MI 48306	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 90.00 Payroll deduction - \$15 semi-monthly
	Occupation PROF. SALES REP.		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 270.00
Full Name, Mailing Address, and ZIP Code ROBERTA Y. NOEL 6385 LA CUMBRE ROAD SOMIS CA 93066	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 150.00 Payroll deduction - \$25 semi-monthly
	Occupation ASSOCIATE MGR REGULATORY INFO SERVICES		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 450.00
Full Name, Mailing Address, and ZIP Code RITA E. NORTON 3530 PINETREE TERRACE FALLS CHURCH VA 22041	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 240.00 Payroll deduction - \$40 semi-monthly
	Occupation SR DIRECTOR GOVT RELATIONS		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 720.00
Full Name, Mailing Address, and ZIP Code STEVEN M. ODRE 615 LAKEVIEW CANYON WESTLAKE VILLAGE CA 91362	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000	Amount of Each Receipt this Period 240.00 Payroll deduction - \$40 semi-monthly
	Occupation VP INTL PROP & ASSOC GEN COUNSEL		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 720.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	9 / 14
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
AMGEN INC POLITICAL ACTION COMMITTEE

Full Name, Mailing Address, and ZIP Code DIANE M. PALUMBO 762 CEDAR POINT PLACE WESTLAKE VILLAGE CA 91362 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$25 semi-monthly	Amount of Each Receipt this Period 150.00
	Occupation DIRECTOR HUMAN RESOURCES		
	Aggregate Year-to-Date > \$ 450.00		
Full Name, Mailing Address, and ZIP Code ALICIA B. PEREZ 13815 GAVINA AVENUE SYLMAR CA 91342 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$15 semi-monthly	Amount of Each Receipt this Period 50.00
	Occupation CONTRACT ADMINISTRATOR		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code KIM C. POLLOCK 3117 BIG SKY DRIVE THOUSAND OAKS CA 91360 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$25 semi-monthly	Amount of Each Receipt this Period 150.00
	Occupation DIRECTOR, BIS		
	Aggregate Year-to-Date > \$ 225.00		
Full Name, Mailing Address, and ZIP Code THOMAS G. ROTTE 5833 BENT OAK ROAD SYLVANIA OH 43560 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$20 semi-monthly	Amount of Each Receipt this Period 120.00
	Occupation PROF. SALES REP.		
	Aggregate Year-to-Date > \$ 300.00		
Full Name, Mailing Address, and ZIP Code JAMES SANABIA PMB 117 53 ESMERALDA AVENUE GUAYNABO PR 00969 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$20 semi-monthly	Amount of Each Receipt this Period 175.00
	Occupation SR DIRECTOR & GENERAL MGR		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code BARRY S. SCHEHR 23 CINCH ROAD BELL CANYON CA 91307 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 07/20/2000 CASH CONTRIBUTION	Amount of Each Receipt this Period 500.00
	Occupation VP FINANCIAL OPERATIONS		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code KEVIN W. SHARER 788 MALCOLM AVENUE LOS ANGELES CA 90024 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$208 semi-monthly	Amount of Each Receipt this Period 1248.00
	Occupation PRESIDENT & COO		
	Aggregate Year-to-Date > \$ 2997.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		10 / 14	
Use separate schedule(s) for each category of the Detailed Summary Page				FOR LINE NUMBER 11A1	
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NAME OF COMMITTEE (In Full) AMGEN INC POLITICAL ACTION COMMITTEE					
Full Name, Mailing Address, and ZIP Code WILLIAM P. SHERIDAN 3032 SHADOW HILL CIRCLE THOUSAND OAKS CA 91360 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation DIRECTOR Aggregate Year-to-Date > \$ 2500.00		Date (month, day, year) 07/23/2000 Amount of Each Receipt this Period 2500.00 CASH CONTRIBUTION	
Full Name, Mailing Address, and ZIP Code EDWARD J. SHUPENUS 118 WADSWORTH AVENUE #1 SANTA MONICA CA 90405 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation MARKETING MGR Aggregate Year-to-Date > \$ 225.00		Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 150.00 Payroll deduction - \$25 semi-monthly	
Full Name, Mailing Address, and ZIP Code STEVE STEFFEN 2114 APPLEWOOD LANE CAMARILLO CA 93012 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation DIRECTOR OPERATIONS PLANNING Aggregate Year-to-Date > \$ 450.00		Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 150.00 Payroll deduction - \$25 semi-monthly	
Full Name, Mailing Address, and ZIP Code HUGH A. SWARTS 8529 SANTA ROSA ROAD CAMARILLO CA 93012 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation VP LOGISTICS OPERATIONS Aggregate Year-to-Date > \$ 850.00		Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 250.00 Payroll deduction - \$50 semi-monthly	
Full Name, Mailing Address, and ZIP Code PETER B. TEELEY 4540 DEXTER STREET, NW WASHINGTON DC 20007 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation VP GOVERNMENT & PUBLIC RELATIONS Aggregate Year-to-Date > \$ 720.00		Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 240.00 Payroll deduction - \$40 semi-monthly	
Full Name, Mailing Address, and ZIP Code JUDI A. TESKE 2719 NORTH NORWOOD STREET ARLINGTON VA 22207 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation SR DIRECTOR Aggregate Year-to-Date > \$ 500.00		Date (month, day, year) 08/08/2000 Amount of Each Receipt this Period 500.00 CASH CONTRIBUTION	
Full Name, Mailing Address, and ZIP Code GEORGE A. VANDEMAN 1652 ALDERCREEK PLACE WESTLAKE VILLAGE CA 91362 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer AMGEN INC. Occupation SR VP GENERAL COUNSEL & SECRETARY Aggregate Year-to-Date > \$ 1350.00		Date (month, day, year) 09/30/2000 Amount of Each Receipt this Period 450.00 Payroll deduction - \$75 semi-monthly	
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	11 / 14
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
AMGEN INC POLITICAL ACTION COMMITTEE

Full Name, Mailing Address, and ZIP Code ROBERT C. WAHL 105 N. MARCELLO AVENUE NEWBURY PARK CA 91320 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$10 semi-monthly	Amount of Each Receipt this Period 60.00
	Occupation RESEARCH SCIENTIST		
	Aggregate Year-to-Date > \$ 430.00		
Full Name, Mailing Address, and ZIP Code JOHN F. WEIDENBRUCH 1667 SAPRA STREET THOUSAND OAKS CA 91362 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$22 semi-monthly	Amount of Each Receipt this Period 132.00
	Occupation CORPORATE COUNSEL		
	Aggregate Year-to-Date > \$ 386.00		
Full Name, Mailing Address, and ZIP Code JEFFREY P. WINEMILLER 15430 TREYBURN MANOR ALPHARETTA GA 30004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$25 semi-monthly	Amount of Each Receipt this Period 150.00
	Occupation ASSOCIATE DIRECTOR SALES		
	Aggregate Year-to-Date > \$ 450.00		
Full Name, Mailing Address, and ZIP Code LINDA R. WUDL 1022 LADERA LANE SANTA BARBARA CA 93108 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer AMGEN INC.	Date (month, day, year) 09/30/2000 Payroll deduction - \$50 semi-monthly	Amount of Each Receipt this Period 300.00
	Occupation EXPERT TECHNICAL EVALUATOR		
	Aggregate Year-to-Date > \$ 900.00		

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SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	15335.00

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	12 / 14
			FOR LINE NUMBER 16
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NAME OF COMMITTEE (In Full) AMGEN INC POLITICAL ACTION COMMITTEE			
Full Name, Mailing Address, and ZIP Code COVERDELL GOOD GOVERNMENT COMMITTEE:THE 3081 MAPLE DRIVE SUITE 200 ATLANTA GA 30305	Name of Employer Occupation	Date (month, day, year) 09/08/2008	Amount of Each Receipt this Period 1000.00 REFUND
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > 5 1000.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			1000.00

