

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 379 OF 476

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AbbVie Political Action Committee

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

A. Stanford, Cherie, A., ,

Mailing Address 1 N Waukegan Rd

City

North Chicago

State

IL

Zip Code

60064-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AbbVie Inc.

Occupation (for Individual)

Director GPO IT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1771.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

Transaction ID : 20171005000-555

Amount of Each Receipt this Period

85.28

☐ Memo Item

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

B. Stanford, Cherie, A., ,

Mailing Address 1 N Waukegan Rd

City

North Chicago

State

IL

Zip Code

60064-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AbbVie Inc.

Occupation (for Individual)

Director GPO IT

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1771.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

Transaction ID : 20171019000-555

Amount of Each Receipt this Period

85.28

☐ Memo Item

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

C. Stanton, Daniel, E., ,

Mailing Address 1 N Waukegan Rd

City

North Chicago

State

IL

Zip Code

60064-1802

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

AbbVie Inc.

Occupation (for Individual)

Mgr Business Systems

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

Transaction ID : 20171005000-1663

Amount of Each Receipt this Period

20.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

190.56

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