#### FORM GPAC GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00069403 3 COMMITTEE NAME **OFFICE USE ONLY** Prime Therapeutics LLC Employee State PAC Date Received **ELECTRONICALLY FILED** 07/15/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 2900 Ames Crossing Road Date Hand-delivered or Date Postmarked Suite 200 Change of Address Eagan, MN 55121 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Michael NAME NICKNAME LAST **SUFFIX** Kolar STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2900 Ames Crossing Road STREET **ADDRESS** Suite 200 (Residence or Business) Eagan, MN 55121-1204 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2900 Ames Crossing Road MAILING **ADDRESS** Suite 200 Eagan, MN 55121-1204 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (612) 777-5647 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Prime Therapeutics L	LC Employee State PAC	;	00069403	
14 COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if			
	applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)  qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICATION (OTHER THAN PLE	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	9,988.45
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	5,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	40,988.85
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		•	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Mr. Mich	ael Kolar	
		Signature of Car	mpaign Treasui	rer
AFFIX NOTAR	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said _	, tr	nis the	day
		which, witness my hand and seal of office.		•
Signature of officer a	administering oath	Printed name of officer administering oath	Title of offic	er administering oath

#### **SUBTOTALS - GPAC**

## FORM **GPAC**COVER SHEET PG 3

			3 of 94
17 COMMITTEE NAME Prime Therapeutics L	LC Employee State PAC	<b>18</b> Filer ID 00069403	(Ethics Commission Filers)
19 SCHEDULE SUBTOTA NAME OF SCHEDULE	LS		SUBTOTAL AMOUNT
1. X SCHEDUL	E A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 9,988.45
2. SCHEDUL	E A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDUL	E B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDUL ORGANIZA	)R	\$	
	E C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA RGANIZATION	ATION OR	\$
6. SCHEDUL	E C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7. SCHEDUL ORGANIZA	E C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ATION		\$
8. SCHEDUL	E D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$
9. SCHEDUL	E E: LOANS		\$
10. X SCHEDUL	E F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 5,000.00
11. SCHEDUL	E F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDUL	E F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13. SCHEDUL	E F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDUL	E I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15. SCHEDUL TO FILER	E K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I	RETURNED	\$

	MONET	ARY POLITICAL CONTRIBU	UTION	IS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to complete	this for	n.	1	Total pages Schedule A1: Sch: 1/90 Rpt: 4/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 01/05/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
8	Principal occu Sales	pation / Job title (See Instructions)	9	Employer (See Instructions Prime Therapeutics	s) 		
	Date 01/19/2024	Full name of contributor out-of-state PA Barth, Drew Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$5.00
	Dringing ogg	Eagan, MN 55121		Employer (See Instructions	<u></u>		
	Sales	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/02/2024	Full name of contributor out-of-state PA Barth, Drew Contributor address; City; State; Zip Code	AC (ID#:	)		Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	Principal occu Sales	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
Date 02/16/2024		Full name of contributor out-of-state PA Barth, Drew Contributor address; City; State; Zip Code Eagan, MN 55121		)		Amount of Contribution (\$)	\$5.00
	Principal occu Sales	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	<u>l</u> 5)		
	Date 03/01/2024	Full name of contributor out-of-state PA Barth, Drew Contributor address; City; State; Zip Code Eagan, MN 55121		)		Amount of Contribution (\$)	\$5.00
	Principal occu Sales	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	s)		

	MONEI	ARY POLITICAL (	CONTRIBUTION	NS		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 2/90 Rpt: 5/94	
2	FILER NAME	peutics LLC Employee State	PAC.		3	Filer ID (Ethics Commission 00069403	Filers)
_	Date	5 Full name of contributor		,	-		
4	03/15/2024	Barth, Drew  6 Contributor address; City; Si	out-of-state PAC (ID#:		ľ	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
8	Principal occu	pation / Job title (See Instructions	s) 9	Employer (See Instructions	5)		
	Sales			Prime Therapeutics			
	Date 03/29/2024	Full name of contributor Barth, Drew Contributor address; City; Si	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	5)		
			Prime Therapeutics				
04/12/2024 Bar		Full name of contributor Barth, Drew Contributor address; City; Si	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	Sales	pation / Job title (See Instructions	5)	Employer (See Instructions Prime Therapeutics	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	04/26/2024	Barth, Drew  Contributor address; City; Si				, and a continue (4)	\$5.00
		Eagan, MN 55121	<u></u>				
	Principal occu Sales	pation / Job title (See Instructions	5)	Employer (See Instructions Prime Therapeutics	5)		
	Date 05/10/2024	Full name of contributor  Barth, Drew	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
		Contributor address; City; Si Eagan, MN 55121	аце; ZIP СОФЕ				
	Principal occu Sales	pation / Job title (See Instructions	5)	Employer (See Instructions Prime Therapeutics	5)		
	Jaies			Time merapeutics			

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to comp	olete this form	n.	1	Total pages Schedule A1: Sch: 3/90 Rpt: 6/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 05/23/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
8	Principal occu Sales	pation / Job title (See Instructions)	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 06/07/2024	Barth, Drew	tate PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
	Dringing aggr	Eagan, MN 55121		Employer (See Instructions	<u></u>		
	Sales	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	o)		
	Date 06/21/2024	Full name of contributor out-of-st Barth, Drew Contributor address; City; State; Zip Cod	tate PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	Principal occu Sales	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	s)		
Date 01/05/2024		Bartosh, Sandra				Amount of Contribution (\$)	\$5.00
	Principal occu Legal Assista	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	<u>I</u> S)		
	Date 01/19/2024	Full name of contributor out-of-st Bartosh, Sandra Contributor address; City; State; Zip Cod Eagan, MN 55121	tate PAC (ID#:		•	Amount of Contribution (\$)	\$5.00
	Principal occu Legal Assista	pation / Job title (See Instructions) ant		Employer (See Instructions Prime Therapeutics	<del>.</del> s)		
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	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 4/90 Rpt: 7/94	
2	FILER NAME Prime Thera	peutics LLC Employee State F	PAC		3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 02/02/2024	<ul><li>5 Full name of contributor Bartosh, Sandra</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$5.00
_		Eagan, MN 55121			_		
8	Principal occu Legal Assista	pation / Job title (See Instructions) ant	9	Employer (See Instructions Prime Therapeutics	5) 		
	Date 02/16/2024	Full name of contributor Bartosh, Sandra Contributor address; City; Sta				Amount of Contribution (\$)	\$5.00
	Deinsinal assu	Eagan, MN 55121		Frankrian (Can Instructions	<u></u>		
	Legal Assista	pation / Job title (See Instructions) ant		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/01/2024	Full name of contributor Bartosh, Sandra Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	Principal occu Legal Assista	pation / Job title (See Instructions) ant		Employer (See Instructions Prime Therapeutics	s)		
Date 03/15/2024		Full name of contributor Bartosh, Sandra Contributor address; City; Sta Eagan, MN 55121	out-of-state PAC (ID#: atte; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu Legal Assista	pation / Job title (See Instructions) ant		Employer (See Instructions Prime Therapeutics	<u> </u> 5)		
	Date 03/29/2024	Full name of contributor Bartosh, Sandra Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
	Principal occu Legal Assista	pation / Job title (See Instructions) ant		Employer (See Instructions Prime Therapeutics	5)		
			L				

	MONET	ARY POLITICAL C	CONTRIBUTION	NS			SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.		1	Total pages Schedule A1: Sch: 5/90 Rpt: 8/94	
2	FILER NAME Prime Thera	peutics LLC Employee State F	PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 04/12/2024	<ul><li>5 Full name of contributor Bartosh, Sandra</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:		)	7	Amount of Contribution (\$)	\$5.00
_		Eagan, MN 55121				L		
8	Principal occu Legal Assista	pation / Job title (See Instructions ant	9		loyer (See Instructions ne Therapeutics	5)		
	Date 04/26/2024	Full name of contributor Bartosh, Sandra Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code			•	Amount of Contribution (\$)	\$5.00
	Dringing aggr	Eagan, MN 55121	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		lover (Coe Instructions	<u></u>		
	Legal Assista	pation / Job title (See Instructions ant	)		loyer (See Instructions ne Therapeutics	5)		
	Date 05/10/2024	Full name of contributor Bartosh, Sandra Contributor address; City; St	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121						
	Principal occu Legal Assista	pation / Job title (See Instructions ant	)		loyer (See Instructions ne Therapeutics	5)		
Date 05/23/2024		Full name of contributor Bartosh, Sandra Contributor address; City; St Eagan, MN 55121	out-of-state PAC (ID#: ate; Zip Code		)		Amount of Contribution (\$)	\$5.00
	Principal occu Legal Assista	pation / Job title (See Instructions ant			loyer (See Instructions ne Therapeutics	<u>I</u> S)		
	Date 06/07/2024	Full name of contributor Bartosh, Sandra Contributor address; City; St Eagan, MN 55121	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$5.00
	Principal occu Legal Assista	pation / Job title (See Instructions ant	)		loyer (See Instructions ne Therapeutics	5)		

	MONET	ARY POLITICAL CONTRIE	BUTION	IS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complet	te this for	n.	1	Total pages Schedule A1: Sch: 6/90 Rpt: 9/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 06/21/2024	<ul> <li>5 Full name of contributor  out-of-state in Bartosh, Sandra</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
8	Principal occu Legal Assista	pation / Job title (See Instructions) ant	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 01/05/2024	Full name of contributor out-of-state if Baumgard, Terry  Contributor address; City; State; Zip Code	PAC (ID#:	)	•	Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
	Principal occupation / Job title (See Instructions)  VP, Corporate Development & Treasury			Employer (See Instructions Prime Therapeutics	s)		
	Date 01/19/2024	Full name of contributor out-of-state in Baumgard, Terry  Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) te Development & Treasury		Employer (See Instructions Prime Therapeutics	s)		
Date Full name of contributor out-of-state 02/02/2024 Baumgard, Terry  Contributor address; City; State; Zip Code		Baumgard, Terry		)		Amount of Contribution (\$)	\$25.00
	•	pation / Job title (See Instructions) te Development & Treasury		Employer (See Instructions Prime Therapeutics	<u>I</u> S)		
	Date 02/16/2024	Full name of contributor out-of-state I Baumgard, Terry  Contributor address; City; State; Zip Code  Eagan, MN 55121	PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions) te Development & Treasury		Employer (See Instructions Prime Therapeutics	5)		
	vi , corpora	те веченоринент с птеазиту		Time Therapeutics			

	MONEI	ETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 7/90 Rpt: 10/94		
2	FILER NAME	peutics LLC Employee State F	PAC.		3	Filer ID (Ethics Commission 00069403	ı Filers)	
_		5 Full name of contributor			_			
4	Date 03/01/2024	Baumgard, Terry  6 Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code	)	ľ	Amount of Contribution (\$)	\$25.00	
Ω	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions)	. 16	Employer (See Instructions				
0		te Development & Treasury		Prime Therapeutics	)			
	vP, Corpora	te Development & Treasury		Prime merapeutics				
	Date 03/15/2024	Full name of contributor Baumgard, Terry Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00	
		Eagan, MN 55121						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	VP, Corpora	/P, Corporate Development & Treasury Prime Therapeutics						
	Date Full name of contributor Out-of-state PAC (ID		out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)		
	03/29/2024	Baumgard, Terry		/		(.,	\$25.00	
		Contributor address; City; Sta	ate; Zip Code					
		Eagan, MN 55121						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	VP, Corpora	te Development & Treasury		Prime Therapeutics				
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)		
04/12/2024 Baumgard, Terry			ate; Zip Code				\$25.00	
	Dringing aggu	pation / Job title (See Instructions)		Employer (See Instructions	·/ 			
	•	te Development & Treasury		Employer (See Instructions Prime Therapeutics	•)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)		
	04/26/2024	Baumgard, Terry					\$25.00	
		Contributor address; City; Sta Eagan, MN 55121	ate; Zip Code					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	VP, Corpora	te Development & Treasury		Prime Therapeutics				

	MONEI	ETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 8/90 Rpt: 11/94		
2	FILER NAME	peutics LLC Employee State P	<b>Δ</b> C		3	Filer ID (Ethics Commission 00069403	ı Filers)	
_					Ŀ			
4	Date 05/10/2024	Full name of contributor     Baumgard, Terry     Contributor address; City; Sta	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$25.00	
Ω	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions)	I	9 Employer (See Instructions				
0		te Development & Treasury	ľ	Prime Therapeutics	>)			
	VI, Corpora	te Development & Treasury			_			
	Date   Full name of contributor   out-of-state PAC (ID#:)   Baumgard, Terry   Contributor address; City; State; Zip Code   Eagan, MN 55121			Amount of Contribution (\$)	\$25.00			
		Eagan, MN 55121						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	VP, Corpora	/P, Corporate Development & Treasury Prime Therapeutics						
Date Full name of contributor out-of-state PAC (ID#:			Т	Amount of Contribution (\$)				
	O6/07/2024 Baumgard, Terry		out of state 1740 (ID#	)		7 and an experience (4)	\$25.00	
		Contributor address; City; Sta	ıte; Zip Code					
		Eagan, MN 55121						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	VP, Corpora	te Development & Treasury		Prime Therapeutics				
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)		
06/21/2024 Baumgard,		Baumgard, Terry  Contributor address; City; Sta			•	· · ·	\$25.00	
		Eagan, MN 55121						
	•	pation / Job title (See Instructions) te Development & Treasury		Employer (See Instructions Prime Therapeutics	s)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)		
	01/05/2024	Berry, Caitlin	<b>-</b>			`,	\$12.50	
		Contributor address; City; Sta	te; Zip Code		-			
		Eagan, MN 55121						
		pation / Job title (See Instructions)		Employer (See Instructions	s)			
	Policy Adviso	or, State Government Affairs		Prime Therapeutics				

	MONEI	ARY POLITICAL CONTR	IBUTION	IS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to compl	lete this forr	n.	1	Total pages Schedule A1: Sch: 9/90 Rpt: 12/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 01/19/2024	Berry, Caitlin	ate PAC (ID#:	)	7	Amount of Contribution (\$)	\$12.50
_	Delicational	Eagan, MN 55121	la		Ĺ		
8		upation / Job title (See Instructions) or, State Government Affairs	9	Employer (See Instructions Prime Therapeutics	<u></u>		
	Date 02/02/2024	Full name of contributor out-of-sta  Berry, Caitlin  Contributor address; City; State; Zip Code	ate PAC (ID#:			Amount of Contribution (\$)	\$12.50
_	Principal occu	Eagan, MN 55121  upation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
		Policy Advisor, State Government Affairs Prime Therapeutics					
	Date Full name of contributor out-of-state PAC (ID#:)  02/16/2024 Berry, Caitlin  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$12.50		
		Eagan, MN 55121					
		pation / Job title (See Instructions) or, State Government Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/01/2024	Berry, Caitlin				Amount of Contribution (\$)	\$12.50
		or, State Government Affairs		Employer (See Instructions Prime Therapeutics	)		
	Date 03/15/2024	Full name of contributor out-of-sta  Berry, Caitlin  Contributor address; City; State; Zip Code  Eagan, MN 55121	ate PAC (ID#:			Amount of Contribution (\$)	\$12.50
		ipation / Job title (See Instructions) or, State Government Affairs		Employer (See Instructions Prime Therapeutics	5)		
	. 55, / 144150			- Indiapolito			

	MONEI	IETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to com	plete this for	m.	1	Total pages Schedule A1: Sch: 10/90 Rpt: 13/94		
2	FILER NAME				3	•	Filers)	
	Prime Thera	peutics LLC Employee State PAC				00069403		
4	Date 03/29/2024	<ul> <li>5 Full name of contributor</li></ul>	state PAC (ID#: ode	)	7	Amount of Contribution (\$)	\$12.50	
		Eagan, MN 55121						
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	)			
	Policy Adviso	or, State Government Affairs		Prime Therapeutics				
	Date 04/12/2024	Full name of contributor out-of-Berry, Caitlin  Contributor address; City; State; Zip Co	state PAC (ID#:	)		Amount of Contribution (\$)	\$12.50	
		Eagan, MN 55121						
		pation / Job title (See Instructions)		Employer (See Instructions	)			
	Policy Advisor, State Government Affairs Prime Therapeutics							
	Date 04/26/2024				Amount of Contribution (\$)	\$12.50		
		Eagan, MN 55121						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)			
	Policy Adviso	or, State Government Affairs		Prime Therapeutics				
	Date Full name of contributor out-of-state PAC (IE 05/10/2024 Berry, Caitlin  Contributor address; City; State; Zip Code  Eagan, MN 55121					Amount of Contribution (\$)	\$12.50	
	•	pation / Job title (See Instructions)		Employer (See Instructions	)			
	Policy Adviso	or, State Government Affairs		Prime Therapeutics				
	Date 05/23/2024	Full name of contributor out-of-Berry, Caitlin  Contributor address; City; State; Zip Co	state PAC (ID#: ode			Amount of Contribution (\$)	\$12.50	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)			
	Policy Adviso	or, State Government Affairs		Prime Therapeutics				

	MONEI	ARY POLITICAL CON	ITRIBUTION	15		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to c	omplete this for	m.	1	Total pages Schedule A1: Sch: 11/90 Rpt: 14/94	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Prime Thera	peutics LLC Employee State PAC				00069403	
4	Date 06/07/2024	<ul> <li>Full name of contributor</li></ul>	ut-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$12.50
		Eagan, MN 55121					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	()		
	Policy Advise	or, State Government Affairs		Prime Therapeutics			
	Date 06/21/2024	Full name of contributor on Derry, Caitlin  Contributor address; City; State; Zi	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$12.50
		Eagan, MN 55121					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Policy Advise	or, State Government Affairs		Prime Therapeutics			
	Date 03/29/2024	Full name of contributor on Double Bodmer, Ken  Contributor address; City; State; Zi	ut-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$95.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Chief Financ	cial Officer		Prime Therapeutics			
	Date 01/05/2024	Full name of contributor on Cantor-Weinberg, Julie Contributor address; City; State; Zive Eagan, MN 55121	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	•	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Principal, Go	overnment Affairs		Prime Therapeutics			
	Date 01/19/2024	Full name of contributor on Cantor-Weinberg, Julie Contributor address; City; State; Zive Eagan, MN 55121	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Principal, Go	overnment Affairs		Prime Therapeutics			

	MONET	ARY POLITICAL CONTRIE	BUTION	S		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complet	te this for	n.	1	Total pages Schedule A1: Sch: 12/90 Rpt: 15/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 02/02/2024	<ul> <li>Full name of contributor  out-of-state</li> <li>Cantor-Weinberg, Julie</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$10.00
_		Eagan, MN 55121	la la		<u></u>		
8		pation / Job title (See Instructions) overnment Affairs	9	Employer (See Instructions Prime Therapeutics	<del></del>		
	Date 02/16/2024	Full name of contributor out-of-state Cantor-Weinberg, Julie  Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Dringing agg	Eagan, MN 55121		Employer (See Instructions	<u></u>		
		pation / Job title (See Instructions) overnment Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/01/2024	Full name of contributor out-of-state   Cantor-Weinberg, Julie Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) overnment Affairs		Employer (See Instructions Prime Therapeutics	s)		
	Date 03/15/2024	Full name of contributor out-of-state Cantor-Weinberg, Julie Contributor address; City; State; Zip Code Eagan, MN 55121				Amount of Contribution (\$)	\$10.00
	•	pation / Job title (See Instructions)  overnment Affairs		Employer (See Instructions Prime Therapeutics	<u>L</u> 5)		
	Date 03/29/2024	Full name of contributor out-of-state Cantor-Weinberg, Julie Contributor address; City; State; Zip Code Eagan, MN 55121	PAC (ID#:			Amount of Contribution (\$)	\$10.00
	•	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
	· ·····oipai, OC			T.inio Therapoulos			

	MONET	ARY POLITICAL CONTRIB	UTION	S		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete	this for	n.	1	Total pages Schedule A1: Sch: 13/90 Rpt: 16/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 04/12/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$10.00
_		Eagan, MN 55121		5 1 (0 1 1 1	<u></u>		
8		pation / Job title (See Instructions) overnment Affairs	9	Employer (See Instructions Prime Therapeutics	<del></del>		
	Date 04/26/2024	Full name of contributor	AC (ID#:			Amount of Contribution (\$)	\$10.00
	Dringinal occu	Eagan, MN 55121 pation / Job title (See Instructions)		Employer (See Instructions	·/		
		overnment Affairs		Prime Therapeutics	·)		
	Date 05/10/2024	Full name of contributor out-of-state Pacantor-Weinberg, Julie  Contributor address; City; State; Zip Code	AC (ID#:	)		Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) overnment Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 05/23/2024	Full name of contributor out-of-state Pacantor-Weinberg, Julie  Contributor address; City; State; Zip Code  Eagan, MN 55121		)		Amount of Contribution (\$)	\$10.00
	•	pation / Job title (See Instructions)  overnment Affairs		Employer (See Instructions Prime Therapeutics	<u>L</u> 5)		
	Date 06/07/2024	Full name of contributor out-of-state Parameter Cantor-Weinberg, Julie  Contributor address; City; State; Zip Code  Eagan, MN 55121	AC (ID#:			Amount of Contribution (\$)	\$10.00
	•	pation / Job title (See Instructions) overnment Affairs		Employer (See Instructions Prime Therapeutics	5)		
	· ·····oipai, OC			Time Therapoulos			

	MONET	ARY POLITICAL CONTRIBUTION	۸C	IS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 14/90 Rpt: 17/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 06/21/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$10.00
_		Eagan, MN 55121	1-		<u></u>		
8		pation / Job title (See Instructions) overnment Affairs	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 03/29/2024	Full name of contributor		)		Amount of Contribution (\$)	\$50.00
		Eagan, MN 55121	_		_		
	•	pation / Job title (See Instructions) nd GM, State Government Solutions		Employer (See Instructions Prime Therapeutics	s)		
	Date 01/05/2024	Full name of contributor			•	Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
	•	pation / Job title (See Instructions) ant General Counsel		Employer (See Instructions Prime Therapeutics	s)		
	Date 01/19/2024	Full name of contributor out-of-state PAC (ID#: Dessner, Alicia Contributor address; City; State; Zip Code  Eagan, MN 55121		)		Amount of Contribution (\$)	\$25.00
	•	pation / Job title (See Instructions) ant General Counsel		Employer (See Instructions Prime Therapeutics	<u>I</u> S)		
	Date 02/02/2024	Full name of contributor out-of-state PAC (ID#: Dessner, Alicia Contributor address; City; State; Zip Code  Eagan, MN 55121				Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions) ant General Counsel		Employer (See Instructions Prime Therapeutics	5)		
	, / 1001010		1	Therapeutics			

	MONET	ARY POLITICAL CONTRIBU	UTION	IS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete	this for	n.	1	Total pages Schedule A1: Sch: 15/90 Rpt: 18/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 02/16/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$25.00
_		Eagan, MN 55121	la la	5 1 (0 1 1 1			
8		pation / Job title (See Instructions) ant General Counsel	9	Employer (See Instructions Prime Therapeutics	S)		
	Date 03/01/2024	Full name of contributor out-of-state PA  Dessner, Alicia  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121			_		
	•	pation / Job title (See Instructions) ant General Counsel		Employer (See Instructions Prime Therapeutics	S)		
	Date 03/15/2024	Full name of contributor out-of-state PA  Dessner, Alicia  Contributor address; City; State; Zip Code	AC (ID#:	)		Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) ant General Counsel		Employer (See Instructions Prime Therapeutics	s)		
	Date 03/29/2024	Full name of contributor out-of-state PA  Dessner, Alicia  Contributor address; City; State; Zip Code  Eagan, MN 55121		)		Amount of Contribution (\$)	\$25.00
	•	pation / Job title (See Instructions) ant General Counsel		Employer (See Instructions Prime Therapeutics	<u>l</u> S)		
	Date 04/12/2024	Full name of contributor out-of-state PA  Dessner, Alicia  Contributor address; City; State; Zip Code  Eagan, MN 55121	AC (ID#:	)		Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions) ant General Counsel		Employer (See Instructions Prime Therapeutics	5)		
	, / 1001010	and Control Courtool		ocrapoullos			

	MONET	ARY POLITICAL CONTRIB	UTION	IS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete	e this for	n.	1	Total pages Schedule A1: Sch: 16/90 Rpt: 19/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 04/26/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$25.00
_		Eagan, MN 55121	la la	5 1 (0 1 1 1			
8		pation / Job title (See Instructions) ant General Counsel	9	Employer (See Instructions Prime Therapeutics	S)		
	Date 05/10/2024	Full name of contributor out-of-state P. Dessner, Alicia Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121		5 1 (0 1 1 1	<u></u>		
	•	pation / Job title (See Instructions) ant General Counsel		Employer (See Instructions Prime Therapeutics	5)		
	Date 05/23/2024	Full name of contributor out-of-state P.  Dessner, Alicia  Contributor address; City; State; Zip Code	AC (ID#:	)	•	Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) ant General Counsel		Employer (See Instructions Prime Therapeutics	5)		
	Date 06/07/2024	Full name of contributor out-of-state P. Dessner, Alicia Contributor address; City; State; Zip Code Eagan, MN 55121		)		Amount of Contribution (\$)	\$25.00
	•	pation / Job title (See Instructions) ant General Counsel		Employer (See Instructions Prime Therapeutics	<u> </u> s)		
	Date 06/21/2024	Full name of contributor out-of-state P. Dessner, Alicia Contributor address; City; State; Zip Code Eagan, MN 55121	AC (ID#:	)		Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions) ant General Counsel		Employer (See Instructions Prime Therapeutics	5)		
	, (VI , A331310	ant General Counsel		Time Therapeutics			

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDULE	E <b>A1</b>
	The Instru	ction Guide explains how to cor	mplete this forr	n.	1	Total pages Schedule A1: Sch: 17/90 Rpt: 20/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 01/05/2024	<ul> <li>5 Full name of contributor  out-o  pout-o  po</li></ul>			7	Amount of Contribution (\$)	\$62.50
_		Eagan, MN 55121			<u></u>		
8	Principal occu VP, Human I	pation / Job title (See Instructions) Resources	9	Employer (See Instructions Prime Therapeutics	<u></u>		
	Date 01/19/2024	Full name of contributor out-o Feigal, Erin Contributor address; City; State; Zip 0				Amount of Contribution (\$)	\$62.50
	Dein sin al a a su	Eagan, MN 55121		Frankrije (Cooks trockie ro	<u></u>		
	VP, Human I	pation / Job title (See Instructions) Resources		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/02/2024	Full name of contributor out-o Feigal, Erin Contributor address; City; State; Zip 0	f-state PAC (ID#:	)		Amount of Contribution (\$)	\$62.50
		Eagan, MN 55121					
	Principal occu VP, Human I	pation / Job title (See Instructions) Resources		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/16/2024	Feigal, Erin				Amount of Contribution (\$)	\$62.50
	Principal occu VP, Human I	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	<u>                                      </u>		
	Date 03/01/2024	Feigal, Erin	f-state PAC (ID#:			Amount of Contribution (\$)	\$62.50
	Principal occu VP, Human I	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
	· , riaman						

	MONEI	ARY POLITICAL CO	ONTRIBUTION	NS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how t	o complete this for	rm.	1	Total pages Schedule A1: Sch: 18/90 Rpt: 21/94	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		peutics LLC Employee State PA	AC			00069403	
4	Date 03/15/2024	<ul><li>5 Full name of contributor</li></ul>	out-of-state PAC (ID#: e; Zip Code	)	7	Amount of Contribution (\$)	\$62.50
		Eagan, MN 55121					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	()		
	VP, Human	Resources		Prime Therapeutics			
	Date 03/29/2024	Full name of contributor Feigal, Erin  Contributor address; City; Stat	out-of-state PAC (ID#: e; Zip Code	)		Amount of Contribution (\$)	\$62.50
		Eagan, MN 55121					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	VP, Human	Resources		Prime Therapeutics			
	Date 04/12/2024	Full name of contributor  Feigal, Erin  Contributor address; City; Stat	out-of-state PAC (ID#: e; Zip Code	)		Amount of Contribution (\$)	\$62.50
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	VP, Human	Resources		Prime Therapeutics			
	Date 04/26/2024	Full name of contributor Feigal, Erin Contributor address; City; Stat Eagan, MN 55121	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$62.50
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	VP, Human	Resources		Prime Therapeutics			
	Date 05/10/2024	Full name of contributor Feigal, Erin  Contributor address; City; Stat  Eagan, MN 55121	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$)	\$62.50
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	·)		
	VP, Human	Resources		Prime Therapeutics			

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDULI	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 19/90 Rpt: 22/94	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Prime Thera	peutics LLC Employee State P	AC			00069403	
4	Date 05/23/2024	<ul><li>5 Full name of contributor Feigal, Erin</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: ate; Zip Code	)	7	Amount of Contribution (\$)	\$62.50
		Eagan, MN 55121					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	<u></u>		
	VP, Human I	Resources		Prime Therapeutics			
	Date 06/07/2024	Full name of contributor Feigal, Erin Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code	)		Amount of Contribution (\$)	\$62.50
	Datasias Issue	Eagan, MN 55121	т	Faralasas (Ossalasatasatisas	<u></u>		
	VP, Human I	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
					_		
	Date 06/21/2024	Full name of contributor Feigal, Erin Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$62.50
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u></u>		
	VP, Human I	Resources		Prime Therapeutics			
	Date 01/05/2024	Full name of contributor Gleason, Patrick Contributor address; City; Sta Eagan, MN 55121	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Assistant Vic	ce President, Health Outcomes	5	Prime Therapeutics			
	Date 01/19/2024	Full name of contributor Gleason, Patrick Contributor address; City; Sta Eagan, MN 55121	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Assistant Vic	ce President, Health Outcomes	5	Prime Therapeutics			

	MONEI	ARY POLITICAL CONTR	IBUTION	15		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to comp	lete this for	m.	1	Total pages Schedule A1: Sch: 20/90 Rpt: 23/94	
2	FILER NAME	nouties LLC Employee State DAC			3	Filer ID (Ethics Commission	n Filers)
		peutics LLC Employee State PAC				00069403	
4	Date 02/02/2024	<ul> <li>5 Full name of contributor</li></ul>	tte PAC (ID#: e	)	7	Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	()		
	Assistant Vic	ce President, Health Outcomes		Prime Therapeutics			
	Date 02/16/2024	Full name of contributor out-of-sta Gleason, Patrick  Contributor address; City; State; Zip Code	tte PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Assistant Vic	ce President, Health Outcomes		Prime Therapeutics			
	Date 03/01/2024	Full name of contributor out-of-sta Gleason, Patrick  Contributor address; City; State; Zip Code	te PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Assistant Vic	ce President, Health Outcomes		Prime Therapeutics			
	Date 03/15/2024	Full name of contributor out-of-sta Gleason, Patrick Contributor address; City; State; Zip Cod Eagan, MN 55121	ute PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Assistant Vic	ce President, Health Outcomes		Prime Therapeutics			
	Date 03/29/2024	Full name of contributor out-of-state Gleason, Patrick Contributor address; City; State; Zip Code Eagan, MN 55121	e	)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Assistant Vic	ce President, Health Outcomes		Prime Therapeutics			
			•				

	MONEI	ARY POLITICAL CONTRI	BUTION	15		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to comple	ete this for	m.	1	Total pages Schedule A1: Sch: 21/90 Rpt: 24/94	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Prime Thera	peutics LLC Employee State PAC				00069403	
4	Date 04/12/2024	<ul> <li>Full name of contributor</li></ul>	e PAC (ID#:	)	7	Amount of Contribution (\$)	\$10.00
_		Eagan, MN 55121					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Assistant Vic	ce President, Health Outcomes		Prime Therapeutics			
	Date 04/26/2024	Full name of contributor out-of-state Gleason, Patrick Contributor address; City; State; Zip Code	e PAC (ID#:			Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Assistant Vice President, Health Outcomes Prime Therapeu		Prime Therapeutics				
	Date 05/10/2024	Full name of contributor out-of-stat Gleason, Patrick Contributor address; City; State; Zip Code	e PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>                                       </u>		
		ce President, Health Outcomes		Prime Therapeutics	,		
	Date 05/23/2024	Full name of contributor out-of-state Gleason, Patrick Contributor address; City; State; Zip Code	e PAC (ID#:			Amount of Contribution (\$)	\$10.00
	•	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Assistant Vic	ce President, Health Outcomes		Prime Therapeutics			
	Date 06/07/2024	Full name of contributor out-of-stat Gleason, Patrick Contributor address; City; State; Zip Code Eagan, MN 55121	e PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Assistant Vic	ce President, Health Outcomes		Prime Therapeutics			

	MONET	ARY POLITICAL CONTRIBUT	ΓΙΟΝ	IS		SCHEDULI	<b>■ A1</b>
	The Instru	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 22/90 Rpt: 25/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 06/21/2024	<ul> <li>Full name of contributor</li></ul>	(ID#:	)	7	Amount of Contribution (\$)	\$10.00
_		Eagan, MN 55121			_		
8	•	pation / Job title (See Instructions) ce President, Health Outcomes	9	Employer (See Instructions Prime Therapeutics	s) 		
	Date 01/05/2024	Full name of contributor	(ID#:			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	•	pation / Job title (See Instructions) ion Development & Support		Employer (See Instructions Prime Therapeutics	s)		
	Date 01/19/2024	Full name of contributor out-of-state PAC ( Graham, James  Contributor address; City; State; Zip Code	(ID#:	)	•	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) ion Development & Support		Employer (See Instructions Prime Therapeutics	s)		
	Date 02/02/2024	Full name of contributor out-of-state PAC ( Graham, James  Contributor address; City; State; Zip Code  Eagan, MN 55121		)		Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) ion Development & Support		Employer (See Instructions Prime Therapeutics	<u>l</u> S)		
	Date 02/16/2024	Full name of contributor out-of-state PAC ( Graham, James  Contributor address; City; State; Zip Code  Eagan, MN 55121	(ID#:	)		Amount of Contribution (\$)	\$5.00
		pation / Job title (See Instructions) ion Development & Support		Employer (See Instructions Prime Therapeutics	5)		
	vi , дррпсац	оп речеюрителя а зарротя		Time Therapeutics			

	MONET	ARY POLITICAL CONTRIBUT	TION	IS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 23/90 Rpt: 26/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 03/01/2024	<ul> <li>Full name of contributor</li></ul>	(ID#:		7	Amount of Contribution (\$)	\$5.00
_		Eagan, MN 55121	-		Ĺ		
8	•	pation / Job title (See Instructions) ion Development & Support	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 03/15/2024	Full name of contributor	(ID#:			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	•	pation / Job title (See Instructions) ion Development & Support		Employer (See Instructions Prime Therapeutics	s)		
	Date 03/29/2024	Full name of contributor out-of-state PAC ( Graham, James  Contributor address; City; State; Zip Code	(ID#:		•	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) ion Development & Support		Employer (See Instructions Prime Therapeutics	s)		
	Date 04/12/2024	Full name of contributor out-of-state PAC ( Graham, James  Contributor address; City; State; Zip Code  Eagan, MN 55121	-	)	•	Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) ion Development & Support		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/26/2024	Full name of contributor out-of-state PAC ( Graham, James  Contributor address; City; State; Zip Code  Eagan, MN 55121	1 (ID#:			Amount of Contribution (\$)	\$5.00
		pation / Job title (See Instructions) ion Development & Support		Employer (See Instructions Prime Therapeutics	5)		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2 3 3 3 5 5 5 5 5 6 5 6 5 6 5 6 5 6 5 6 5		· ······· · · · · · · · · · · · · · ·			

	MONEI	ARY POLITICAL CO	ONTRIBUTIO	NS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how t	o complete this fo	rm.	1	Total pages Schedule A1: Sch: 24/90 Rpt: 27/94	
2	FILER NAME	a sutine III O Francisco e Chata D	10		3	Filer ID (Ethics Commission	Filers)
		peutics LLC Employee State PA	_			00069403	
4	Date 05/10/2024	5 Full name of contributor Graham, James 6 Contributor address; City; Stat	out-of-state PAC (ID#:e; Zip Code	)	7	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
8		pation / Job title (See Instructions)	Ş	Employer (See Instructions	5)		
	VP, Applicat	ion Development & Support		Prime Therapeutics			
	Date 05/23/2024	Full name of contributor Graham, James  Contributor address; City; Stat	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	VP, Application Development & Support			Prime Therapeutics			
	Date 06/07/2024				Amount of Contribution (\$)	\$5.00	
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>                                       </u>		
		ion Development & Support		Prime Therapeutics			
	Date 06/21/2024	Full name of contributor Graham, James Contributor address; City; Stat Eagan, MN 55121	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions)		Employer (See Instructions	()		
	VP, Applicati	ion Development & Support		Prime Therapeutics			
	Date 01/05/2024	Full name of contributor Henshaw, Jarrod Contributor address; City; Stat Eagan, MN 55121	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Senior Vice I	President		Prime Therapeutics			
			·				

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 25/90 Rpt: 28/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC	;		3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 01/19/2024	Henshaw, Jarrod	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$25.00
_	Dein six all a says	Eagan, MN 55121	T <sub>a</sub>	Faralas as (Cara la describir a	<u></u>		
8	Senior Vice I	pation / Job title (See Instructions) President	9	Employer (See Instructions Prime Therapeutics	<del></del>		
	Date 02/02/2024	Full name of contributor  Henshaw, Jarrod  Contributor address; City; State;				Amount of Contribution (\$)	\$25.00
	Dein sin al a a su	Eagan, MN 55121		Farabasa (On a bantantia	$\overline{\Gamma}$		
	Principal occupation / Job title (See Instructions) Senior Vice President			Employer (See Instructions Prime Therapeutics	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  02/16/2024 Henshaw, Jarrod  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$25.00	
		Eagan, MN 55121					
	Principal occu Senior Vice I	pation / Job title (See Instructions) President		Employer (See Instructions Prime Therapeutics	5)		
Date Full name of contributor out-of-state PAC (ID# 03/01/2024 Henshaw, Jarrod		out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$25.00	
	Principal occu Senior Vice I	pation / Job title (See Instructions) President		Employer (See Instructions Prime Therapeutics	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  03/15/2024 Henshaw, Jarrod  Contributor address; City; State; Zip Code  Eagan, MN 55121			Amount of Contribution (\$)	\$25.00		
	Principal occu Senior Vice I	pation / Job title (See Instructions)  President		Employer (See Instructions Prime Therapeutics	5)		
	Service Vice I						

	MONEI	ARY POLITICAL C	CONTRIBUTIO	NS		SCHEDULI	<b>E A1</b>
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 26/90 Rpt: 29/94	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Prime Thera	peutics LLC Employee State F	PAC			00069403	
4	Date 03/29/2024	<ul><li>5 Full name of contributor Henshaw, Jarrod</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
8	Principal occu	pation / Job title (See Instructions	)	9 Employer (See Instructions	<u>.                                    </u>		
	Senior Vice	President		Prime Therapeutics			
	Date 04/12/2024	Full name of contributor Henshaw, Jarrod Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code		•	Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121			Ĺ		
		pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	Senior Vice President			Prime Therapeutics			
	Date Full name of contributor out-of-state PAC (ID#:		)	•	Amount of Contribution (\$)	\$25.00	
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	<u>.                                    </u>		
	Senior Vice	President		Prime Therapeutics			
		out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$25.00	
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	Senior Vice	President		Prime Therapeutics			
	Date 05/23/2024	Full name of contributor Henshaw, Jarrod Contributor address; City; St Eagan, MN 55121	out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	Senior Vice	President		Prime Therapeutics			

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 27/90 Rpt: 30/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 06/07/2024	5 Full name of contributor out	:-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$25.00
_		Eagan, MN 55121					
8	Principal occu Senior Vice I	pation / Job title (See Instructions) President	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 06/21/2024	Full name of contributor our denshaw, Jarrod  Contributor address; City; State; Zip				Amount of Contribution (\$)	\$25.00
	Deinsinal assu	Eagan, MN 55121	<u> </u>	Frankrian (Cook bathurtian	_		
	Senior Vice I	pation / Job title (See Instructions) President		Employer (See Instructions Prime Therapeutics	5)		
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$2.50	
		Eagan, MN 55121					
	Principal occu Sr. Legal Ad	pation / Job title (See Instructions) ministrator		Employer (See Instructions Prime Therapeutics	5)		
Date Full name of contributor out-of-state PAC (ID 01/19/2024 Hogan, Nadine		of-state PAC (ID#:			Amount of Contribution (\$)	\$2.50	
	Principal occu Sr. Legal Ad	pation / Job title (See Instructions) ministrator		Employer (See Instructions Prime Therapeutics	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  02/02/2024 Hogan, Nadine  Contributor address; City; State; Zip Code  Eagan, MN 55121			Amount of Contribution (\$)	\$2.50		
	Principal occu Sr. Legal Ad	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
	5 20gui / tu						

	MONET	ARY POLITICAL CONTRIE	BUTION	S		SCHEDULE	<b>A1</b>
	The Instruc	ction Guide explains how to complet	te this for	n.	1	Total pages Schedule A1: Sch: 28/90 Rpt: 31/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 02/16/2024	<ul> <li>Full name of contributor  out-of-state Hogan, Nadine</li> <li>Contributor address; City; State; Zip Code</li> </ul>	-	)	7	Amount of Contribution (\$)	\$2.50
_	Daine in a la casa	Eagan, MN 55121	la la	Frankrick (October to the Atlantic oc			
8	Sr. Legal Ad	pation / Job title (See Instructions) ministrator	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 03/01/2024	Full name of contributor out-of-state Hogan, Nadine Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$2.50
	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Sr. Legal Ad			Prime Therapeutics	"		
Date Full name of contributor out-of-state PAC (ID#:		)	•	Amount of Contribution (\$)	\$2.50		
		Eagan, MN 55121					
	Principal occu Sr. Legal Ad	pation / Job title (See Instructions) ministrator		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/29/2024	Hogan, Nadine	PAC (ID#:	)	•	Amount of Contribution (\$)	\$2.50
	Principal occu Sr. Legal Ad	pation / Job title (See Instructions) ministrator		Employer (See Instructions Prime Therapeutics	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  04/12/2024 Hogan, Nadine  Contributor address; City; State; Zip Code  Eagan, MN 55121			Amount of Contribution (\$)	\$2.50		
	Principal occu Sr. Legal Ad	pation / Job title (See Instructions) ministrator		Employer (See Instructions Prime Therapeutics	5)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 29/90 Rpt: 32/94	
2	FILER NAME Prime Thera	peutics LLC Employee State P	AC		3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 04/26/2024	<ul><li>5 Full name of contributor Hogan, Nadine</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$2.50
8		Eagan, MN 55121 pation / Job title (See Instructions)	٤	9 Employer (See Instructions	<u> </u> 5)		
	Date 05/10/2024	Full name of contributor Hogan, Nadine Contributor address; City; Sta	out-of-state PAC (ID#:	Prime Therapeutics		Amount of Contribution (\$)	\$2.50
	Principal occupation / Job title (See Instructions) Sr. Legal Administrator			Employer (See Instructions Prime Therapeutics	<u> </u> 5)		
	Date 05/23/2024	Full name of contributor Hogan, Nadine Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code	)		Amount of Contribution (\$)	\$2.50
		Eagan, MN 55121					
	Principal occu Sr. Legal Ad	pation / Job title (See Instructions) ministrator		Employer (See Instructions Prime Therapeutics	5)		
Date Full name of contributor out-of-sta 06/07/2024 Hogan, Nadine  Contributor address; City; State; Zip Cod		out-of-state PAC (ID#: ite; Zip Code	)		Amount of Contribution (\$)	\$2.50	
	Principal occu Sr. Legal Ad	Eagan, MN 55121 pation / Job title (See Instructions) ministrator		Employer (See Instructions Prime Therapeutics	<u> </u> 5)		
	Date Full name of contributor out-of-state PAC (ID#:)  06/21/2024 Hogan, Nadine  Contributor address; City; State; Zip Code  Eagan, MN 55121			Amount of Contribution (\$)	\$2.50		
	Principal occu Sr. Legal Ad	pation / Job title (See Instructions) ministrator		Employer (See Instructions Prime Therapeutics	s)		
			<u> </u>				

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDULI	<b>■ A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 30/90 Rpt: 33/94	
2	FILER NAME Prime Thera	peutics LLC Employee State P	AC		3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 01/05/2024	<ul><li>5 Full name of contributor Johnson, Charles</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: ite; Zip Code		7	Amount of Contribution (\$)	\$15.00
_	Dringing aggr	Eagan, MN 55121	lo.	Employer (See Instructions	<u></u>		
8	Managing Co	pation / Job title (See Instructions) ounsel	9	Employer (See Instructions Prime Therapeutics	·)		
	Date 01/19/2024	Full name of contributor Johnson, Charles Contributor address; City; Sta			•	Amount of Contribution (\$)	\$15.00
	Dringinal occu	Eagan, MN 55121 pation / Job title (See Instructions)		Employer (See Instructions	-/- 		
	Managing Co			Prime Therapeutics	>)		
	Date Full name of contributor out-of-state PAC (ID#:  02/02/2024 Johnson, Charles  Contributor address; City; State; Zip Code		)	•	Amount of Contribution (\$)	\$15.00	
		Eagan, MN 55121					
	Principal occu Managing Co	pation / Job title (See Instructions) ounsel		Employer (See Instructions Prime Therapeutics	s)		
Date Full name of contributor out-of-state PAC (ID 02/16/2024 Johnson, Charles		out-of-state PAC (ID#: tte; Zip Code	)	•	Amount of Contribution (\$)	\$15.00	
	Principal occu Managing Co	pation / Job title (See Instructions) ounsel		Employer (See Instructions Prime Therapeutics	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  03/01/2024 Johnson, Charles  Contributor address; City; State; Zip Code  Eagan, MN 55121			Amount of Contribution (\$)	\$15.00		
	Principal occu Managing Co	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
	a.iaging O			e merapeutics			

	MONET	ARY POLITICAL C	ONTRIBUTION	S		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how t	to complete this form	n.	1	Total pages Schedule A1: Sch: 31/90 Rpt: 34/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PA	AC		3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 03/15/2024	5 Full name of contributor [ Johnson, Charles	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$15.00
_	Dringing age	Eagan, MN 55121	10	Employer (See Instructions	<u></u>		
8	Managing Co	pation / Job title (See Instructions) ounsel	9	Employer (See Instructions Prime Therapeutics	s) 		
	Date 03/29/2024	Full name of contributor  Johnson, Charles  Contributor address; City; Stat			•	Amount of Contribution (\$)	\$15.00
	Deinsinal assu	Eagan, MN 55121		Franks on (Cas Instructions	<u></u>		
	Managing Co	pation / Job title (See Instructions) ounsel		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/12/2024	Full name of contributor  Johnson, Charles  Contributor address; City; Stat	out-of-state PAC (ID#:	)	-	Amount of Contribution (\$)	\$15.00
		Eagan, MN 55121					
	Principal occu Managing Co	pation / Job title (See Instructions) ounsel		Employer (See Instructions Prime Therapeutics	s)		
	Date 04/26/2024	Full name of contributor  Johnson, Charles  Contributor address; City; Stat  Eagan, MN 55121	out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$5.00
	Principal occu Managing Co	pation / Job title (See Instructions) punsel		Employer (See Instructions Prime Therapeutics	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 05/10/2024 Johnson, Charles  Contributor address; City; State; Zip Code  Eagan, MN 55121			Amount of Contribution (\$)	\$5.00		
	Principal occu Managing Co	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDULE	A1
	The Instru	ction Guide explains how to	o complete this form	n.	1	Total pages Schedule A1: Sch: 32/90 Rpt: 35/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PA	С		3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 05/23/2024	5 Full name of contributor	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$5.00
_	Deinsinal	Eagan, MN 55121		Frankrije (Cookstantiis an	$\overline{\Gamma}$		
8	Managing Co	pation / Job title (See Instructions) punsel	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 06/07/2024	Full name of contributor  Johnson, Charles  Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$5.00
	Dringing ogg	Eagan, MN 55121	1	Employer (See Instructions	·/		
	Managing Co	pation / Job title (See Instructions) ounsel		Prime Therapeutics	)		
	Date 06/21/2024	Full name of contributor Johnson, Charles Contributor address; City; State	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	Principal occu Managing Co	pation / Job title (See Instructions) ounsel		Employer (See Instructions Prime Therapeutics	5)		
	Date 01/05/2024	Full name of contributor Johnson, Steven Contributor address; City; State Eagan, MN 55121	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) ce President, Health Outcomes		Employer (See Instructions Prime Therapeutics	5)		
	Date 01/19/2024	Full name of contributor Johnson, Steven Contributor address; City; State Eagan, MN 55121	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) ce President, Health Outcomes		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 33/90 Rpt: 36/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 02/02/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121	_				
8	•	pation / Job title (See Instructions) ce President, Health Outcomes	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 02/16/2024	Full name of contributor out-of-state PAC (ID#:_ Johnson, Steven Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$5.00
	Deinsinal assu	Eagan, MN 55121	_	Franks on (Cook batturetiens	<u></u>		
	•	pation / Job title (See Instructions) ce President, Health Outcomes		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/01/2024				Amount of Contribution (\$)	\$5.00	
		Eagan, MN 55121					
	•	pation / Job title (See Instructions) ce President, Health Outcomes		Employer (See Instructions Prime Therapeutics	s)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Johnson, Steven Contributor address; City; State; Zip Code Eagan, MN 55121		)		Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) ce President, Health Outcomes		Employer (See Instructions Prime Therapeutics	s)		
	Date 03/29/2024	Full name of contributor out-of-state PAC (ID#:_ Johnson, Steven  Contributor address; City; State; Zip Code  Eagan, MN 55121				Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) ce President, Health Outcomes		Employer (See Instructions Prime Therapeutics	5)		
	, cootant vic	S. Fosidorit, Froduit Outdomes	<u>1                                    </u>	. Time Therapeutics			

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 34/90 Rpt: 37/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 04/12/2024	<ul><li>5 Full name of contributor ou Johnson, Steven</li><li>6 Contributor address; City; State; Zip</li></ul>			7	Amount of Contribution (\$)	\$5.00
_		Eagan, MN 55121					
8	•	pation / Job title (See Instructions) ce President, Health Outcomes	9	Employer (See Instructions Prime Therapeutics	i)		
	Date 01/05/2024	Full name of contributor ou Johnston, Deanna Contributor address; City; State; Zij	t-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	Dringing agg	Eagan, MN 55121		Employer (Coo Instructions			
	Government	pation / Job title (See Instructions) Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 01/19/2024	Full name of contributor ou Johnston, Deanna Contributor address; City; State; Zi	t-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
	Principal occu Government	pation / Job title (See Instructions) Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/02/2024	Johnston, Deanna	t-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Government	pation / Job title (See Instructions) Affairs		Employer (See Instructions Prime Therapeutics	()		
	Date 02/16/2024	Johnston, Deanna	t-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Government	pation / Job title (See Instructions)  Affairs		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDULE	<b>■ A1</b>
	The Instruc	ction Guide explains how t	o complete this form	n.	1	Total pages Schedule A1: Sch: 35/90 Rpt: 38/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PA	vC		3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 03/01/2024	<ul><li>5 Full name of contributor Johnston, Deanna</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#: e; Zip Code		7	Amount of Contribution (\$)	\$25.00
	Dringing! agg.	Eagan, MN 55121	10	Employer (Con Instructions	<u></u>		
8	Government	pation / Job title (See Instructions) Affairs	9	Employer (See Instructions Prime Therapeutics	·)		
	Date 03/15/2024	Full name of contributor  Johnston, Deanna  Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$25.00
	Drincinal occu	Eagan, MN 55121 pation / Job title (See Instructions)		Employer (See Instructions	·/_		
	Government			Prime Therapeutics	)		
	Date 03/29/2024	Full name of contributor Johnston, Deanna Contributor address; City; State	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
	Principal occu Government	pation / Job title (See Instructions) Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/12/2024	Full name of contributor Johnston, Deanna Contributor address; City; State Eagan, MN 55121				Amount of Contribution (\$)	\$25.00
	Principal occu Government	pation / Job title (See Instructions) Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/26/2024	Full name of contributor Johnston, Deanna Contributor address; City; State Eagan, MN 55121	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$)	\$25.00
	Principal occu Government	pation / Job title (See Instructions)  Affairs		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL COI	NTRIBUTION	S		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 36/90 Rpt: 39/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	r Filers)
4	Date 05/10/2024	<ul> <li>5 Full name of contributor</li></ul>			7	Amount of Contribution (\$)	\$25.00
_	District	Eagan, MN 55121	- Ia	Frankrika (Con Joseph Artica)	<u></u>		
8	Government	pation / Job title (See Instructions) Affairs	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 05/23/2024	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions)		Employer (See Instructions	) 		
	Government			Prime Therapeutics	',		
	Date 06/07/2024	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
	Principal occu Government	pation / Job title (See Instructions) Affairs		Employer (See Instructions Prime Therapeutics	s)		
	Date 06/21/2024	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Government	pation / Job title (See Instructions) Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 01/05/2024	Full name of contributor Grant	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
	, vi , i loude	r. Oversigni		Time merapeutics			

	MONET	ARY POLITICAL CONTRIBU	ITION	IS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete t	his for	m.	1	Total pages Schedule A1: Sch: 37/90 Rpt: 40/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 01/19/2024	<ul> <li>Full name of contributor  out-of-state PAC Kishel Geiger, Kimberly</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$10.00
_		Eagan, MN 55121			_		
8	AVP, Produc	pation / Job title (See Instructions) ct Oversight	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 02/02/2024	Full name of contributor out-of-state PAC Kishel Geiger, Kimberly Contributor address; City; State; Zip Code	C (ID#:	)		Amount of Contribution (\$)	\$10.00
	Deinsinal assu	Eagan, MN 55121	<u> </u>	Franks on (Cook bathwetis no	<u></u>		
	AVP, Produc	pation / Job title (See Instructions) ct Oversight		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/16/2024	Full name of contributor out-of-state PAC Kishel Geiger, Kimberly Contributor address; City; State; Zip Code	(ID#:	)	•	Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
	Principal occu AVP, Produc	pation / Job title (See Instructions) ct Oversight		Employer (See Instructions Prime Therapeutics	s)		
	Date 03/01/2024	Full name of contributor out-of-state PAC Kishel Geiger, Kimberly Contributor address; City; State; Zip Code Eagan, MN 55121		)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	<u>l</u> 5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Kishel Geiger, Kimberly Contributor address; City; State; Zip Code  Eagan, MN 55121	C (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	s)		
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	MONET	ARY POLITICAL C	CONTRIBUTION	N:	S 		SCHEDULI	<b>■ A1</b>
	The Instru	ction Guide explains how	to complete this for	rn	1.	1	Total pages Schedule A1: Sch: 38/90 Rpt: 41/94	
2	FILER NAME Prime Thera	peutics LLC Employee State F	PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 03/29/2024	<ul><li>5 Full name of contributor</li><li>Kishel Geiger, Kimberly</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#: ate; Zip Code		)	7	Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121						
8	Principal occu AVP, Produc	pation / Job title (See Instructions at Oversight	9		Employer (See Instructions Prime Therapeutics	s)		
	Date 04/12/2024	Full name of contributor Kishel Geiger, Kimberly Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code			•	Amount of Contribution (\$)	\$10.00
	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions	)		Employer (See Instructions	<u> </u> s)		
	AVP, Produc	,	,		Prime Therapeutics	,		
	Date 04/26/2024	Full name of contributor Kishel Geiger, Kimberly Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code			•	Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121						
	Principal occu AVP, Produc	pation / Job title (See Instructions ct Oversight	)		Employer (See Instructions Prime Therapeutics	s)		
	Date 05/10/2024	Full name of contributor Kishel Geiger, Kimberly Contributor address; City; St Eagan, MN 55121	out-of-state PAC (ID#:ate; Zip Code			•	Amount of Contribution (\$)	\$10.00
	Principal occu AVP, Produc	pation / Job title (See Instructions at Oversight	)		Employer (See Instructions Prime Therapeutics	5)		
	Date 05/23/2024	Full name of contributor Kishel Geiger, Kimberly Contributor address; City; St Eagan, MN 55121	out-of-state PAC (ID#:		)	•	Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions	)		Employer (See Instructions Prime Therapeutics	s)		
	, : 7534							

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 39/90 Rpt: 42/94	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		peutics LLC Employee State P				00069403	
4	Date 06/07/2024	Full name of contributor     Kishel Geiger, Kimberly     Contributor address; City; Sta	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	AVP, Produc	ct Oversight		Prime Therapeutics			
	Date 06/21/2024	Full name of contributor Kishel Geiger, Kimberly Contributor address; City; Sta	out-of-state PAC (ID#: ite; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	AVP, Produc	ct Oversight		Prime Therapeutics			
	Date 01/05/2024	Full name of contributor Kolar, Michael Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$96.15
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	SVP, Genera	al Counsel		Prime Therapeutics			
	Date 01/19/2024	Full name of contributor Kolar, Michael Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$96.15
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	SVP, Genera	al Counsel		Prime Therapeutics			
	Date 02/02/2024	Full name of contributor Kolar, Michael Contributor address; City; Sta Eagan, MN 55121	out-of-state PAC (ID#: tte; Zip Code			Amount of Contribution (\$)	\$96.15
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	SVP, Genera	al Counsel		Prime Therapeutics			

	MONET	ARY POLITICAL CONT	TRIBUTION	S		SCHEDULI	<b>■ A1</b>
	The Instruc	ction Guide explains how to co	mplete this forr	n.	1	Total pages Schedule A1: Sch: 40/90 Rpt: 43/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 02/16/2024	<ul> <li>Full name of contributor out-out-out-out-out-out-out-out-out-out-</li></ul>			7	Amount of Contribution (\$)	\$96.15
_	5	Eagan, MN 55121			_		
8	SVP, Genera	pation / Job title (See Instructions) al Counsel	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 03/01/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-				Amount of Contribution (\$)	\$96.15
	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions)		Employer (See Instructions	·,		
	SVP, Genera			Prime Therapeutics	)		
	Date 03/15/2024	Full name of contributor out-o Kolar, Michael Contributor address; City; State; Zip o	of-state PAC (ID#:	)		Amount of Contribution (\$)	\$96.15
		Eagan, MN 55121					
	Principal occu SVP, Genera	pation / Job title (See Instructions) al Counsel		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/29/2024	Kolar, Michael	of-state PAC (ID#:			Amount of Contribution (\$)	\$96.15
	Principal occu SVP, Genera	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	<u> </u> 5)		
	Date 04/12/2024	Kolar, Michael	of-state PAC (ID#:			Amount of Contribution (\$)	\$96.15
	Principal occu SVP, Genera	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
	2, 2011011	·· · · · · · · · · · · · · · · · · · ·	l				

	MONET	ARY POLITICAL CONT	TRIBUTION	S		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to co	mplete this forr	m.	1	Total pages Schedule A1: Sch: 41/90 Rpt: 44/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	r Filers)
4	Date 04/26/2024	<ul><li>5 Full name of contributor out-out-out-out-out-out-out-out-out-out-</li></ul>		)	7	Amount of Contribution (\$)	\$96.15
_	District	Eagan, MN 55121		Farada e a (O a de atrocatione	<u></u>		
8	SVP, Genera	pation / Job title (See Instructions) al Counsel	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 05/10/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-				Amount of Contribution (\$)	\$96.15
	Dringinal occu	Eagan, MN 55121 pation / Job title (See Instructions)		Employer (See Instructions	·/_		
	SVP, General Counsel			Prime Therapeutics	)		
	Date 05/23/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:	)		Amount of Contribution (\$)	\$96.15
		Eagan, MN 55121					
	Principal occu SVP, Genera	pation / Job title (See Instructions) al Counsel		Employer (See Instructions Prime Therapeutics	5)		
	Date 06/07/2024	Kolar, Michael	of-state PAC (ID#:			Amount of Contribution (\$)	\$96.15
	Principal occu SVP, Genera	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	<u> </u> 5)		
	Date 06/21/2024	Kolar, Michael	of-state PAC (ID#:			Amount of Contribution (\$)	\$96.15
	Principal occu SVP, Genera	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
	JVI , GONGIE			Time Therapeutics			

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 42/90 Rpt: 45/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 01/05/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$5.00
_		Eagan, MN 55121			_		
8	•	pation / Job title (See Instructions) narmacy Network Pricing	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 01/19/2024	Full name of contributor out-of-state PAC ( Kracke, Melanie  Contributor address; City; State; Zip Code	(ID#:			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121			L		
	•	pation / Job title (See Instructions) narmacy Network Pricing		Employer (See Instructions Prime Therapeutics	s)		
	Date 02/02/2024	Full name of contributor out-of-state PAC ( Kracke, Melanie  Contributor address; City; State; Zip Code	(ID#:	)		Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) narmacy Network Pricing		Employer (See Instructions Prime Therapeutics	s)		
	Date 02/16/2024	Full name of contributor out-of-state PAC ( Kracke, Melanie  Contributor address; City; State; Zip Code  Eagan, MN 55121		)		Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) narmacy Network Pricing		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/01/2024	Full name of contributor out-of-state PAC (Kracke, Melanie  Contributor address; City; State; Zip Code  Eagan, MN 55121	(ID#:	)		Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) narmacy Network Pricing		Employer (See Instructions Prime Therapeutics	5)		
	wanayer, Fr	iamacy Network Flicing	<u> </u>	Time Therapeutics			

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 43/90 Rpt: 46/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 03/15/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$5.00
_		Eagan, MN 55121	1-		Ĺ		
8	•	pation / Job title (See Instructions) narmacy Network Pricing	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 03/29/2024	Full name of contributor	(ID#:			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	•	pation / Job title (See Instructions) narmacy Network Pricing		Employer (See Instructions Prime Therapeutics	s)		
	Date 04/12/2024	Full name of contributor out-of-state PAC Kracke, Melanie  Contributor address; City; State; Zip Code	(ID#:	)		Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	•	pation / Job title (See Instructions) narmacy Network Pricing		Employer (See Instructions Prime Therapeutics	s)		
	Date 04/26/2024	Full name of contributor out-of-state PAC Kracke, Melanie  Contributor address; City; State; Zip Code  Eagan, MN 55121		)		Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) narmacy Network Pricing		Employer (See Instructions Prime Therapeutics	5)		
	Date 05/10/2024	Full name of contributor out-of-state PAC Kracke, Melanie  Contributor address; City; State; Zip Code  Eagan, MN 55121	(ID#:	)		Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) narmacy Network Pricing		Employer (See Instructions Prime Therapeutics	5)		
	wanayer, Fr	idiniday Network Filoling		Time Therapeutics			

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to complete th	his for	m.	1	Total pages Schedule A1: Sch: 44/90 Rpt: 47/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 05/23/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$5.00
_		Eagan, MN 55121			<u></u>		
8	•	pation / Job title (See Instructions) narmacy Network Pricing	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 06/07/2024	Full name of contributor	(ID#:			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	•	pation / Job title (See Instructions) narmacy Network Pricing		Employer (See Instructions Prime Therapeutics	s)		
	Date 06/21/2024	Full name of contributor out-of-state PAC Kracke, Melanie Contributor address; City; State; Zip Code	(ID#:	)		Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) narmacy Network Pricing		Employer (See Instructions Prime Therapeutics	s)		
	Date 01/05/2024	Full name of contributor out-of-state PAC Krueger, Linsey  Contributor address; City; State; Zip Code  Eagan, MN 55121				Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) overnment Services		Employer (See Instructions Prime Therapeutics	<u>(</u>		
	Date 01/19/2024	Full name of contributor out-of-state PAC Krueger, Linsey Contributor address; City; State; Zip Code  Eagan, MN 55121	I (ID#:	)		Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	wanayer, G0	overnment Services		Prime Therapeutics			

	MONET	ARY POLITICAL CONTRIBI	UTION	IS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to complete	this for	n.	1	Total pages Schedule A1: Sch: 45/90 Rpt: 48/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 02/02/2024	<ul> <li>Full name of contributor  out-of-state PA Krueger, Linsey</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$5.00
_		Eagan, MN 55121	la la	5 1 (2 1 1 1	<u></u>		
8		pation / Job title (See Instructions) overnment Services	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 02/16/2024	Full name of contributor out-of-state PA Krueger, Linsey  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$5.00
	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	•	overnment Services		Prime Therapeutics	-,		
	Date 03/01/2024	Full name of contributor out-of-state PA Krueger, Linsey Contributor address; City; State; Zip Code	AC (ID#:			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) overnment Services		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/15/2024	Full name of contributor out-of-state PA Krueger, Linsey Contributor address; City; State; Zip Code  Eagan, MN 55121				Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) overnment Services		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/29/2024	Full name of contributor out-of-state PA Krueger, Linsey Contributor address; City; State; Zip Code  Eagan, MN 55121	AC (ID#:	)	•	Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	wanayer, G	overnment Services		Prime Therapeutics			

	MONEI	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 46/90 Rpt: 49/94	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Prime Thera	peutics LLC Employee State	PAC			00069403	
4	Date 04/12/2024	<ul><li>5 Full name of contributor Krueger, Linsey</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
8	Principal occu	pation / Job title (See Instructions	3)	9 Employer (See Instructions	5)		
	Manager, Go	overnment Services		Prime Therapeutics			
	Date 04/26/2024	Full name of contributor Krueger, Linsey Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121	ļ				
		pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Manager, Government Services			Prime Therapeutics			
	Date 05/10/2024	Full name of contributor Krueger, Linsey Contributor address; City; S	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>.                                    </u>		
	Manager, Go	overnment Services		Prime Therapeutics			
	Date 05/23/2024	Full name of contributor Krueger, Linsey Contributor address; City; Si Eagan, MN 55121	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	5)		
	Manager, Go	overnment Services		Prime Therapeutics			
	Date 06/07/2024	Full name of contributor Krueger, Linsey Contributor address; City; S Eagan, MN 55121	out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Manager, Go	overnment Services		Prime Therapeutics			

	MONET	ARY POLITICAL CONTRIBUTION	NC	IS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 47/90 Rpt: 50/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 06/21/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Krueger, Linsey</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$)	\$5.00
_		Eagan, MN 55121	1_		<u></u>		
8		pation / Job title (See Instructions) overnment Services	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 01/05/2024	Full name of contributor out-of-state PAC (ID#: Kueneman, Kamie  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121	_				
	•	pation / Job title (See Instructions) ee President, Client Engagement		Employer (See Instructions Prime Therapeutics	s)		
	Date 01/19/2024	Full name of contributor out-of-state PAC (ID#: Kueneman, Kamie Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
	•	pation / Job title (See Instructions) se President, Client Engagement		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/02/2024	Full name of contributor out-of-state PAC (ID#: Kueneman, Kamie  Contributor address; City; State; Zip Code  Eagan, MN 55121			•	Amount of Contribution (\$)	\$25.00
	•	pation / Job title (See Instructions) ce President, Client Engagement		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/16/2024	Full name of contributor out-of-state PAC (ID#: Kueneman, Kamie  Contributor address; City; State; Zip Code  Eagan, MN 55121				Amount of Contribution (\$)	\$25.00
	•	pation / Job title (See Instructions) ce President, Client Engagement		Employer (See Instructions Prime Therapeutics	5)		
	. regional vio	or resident, energiagement	<u> </u>	e merapeutics			

	MONEI	ARY POLITICAL CONTRIBU	HOI	NS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete t	this fo	rm.	1	Total pages Schedule A1: Sch: 48/90 Rpt: 51/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 03/01/2024	<ul> <li>Full name of contributor</li></ul>	C (ID#:	)	7	Amount of Contribution (\$)	\$25.00
_	5	Eagan, MN 55121	- 1-		Ĺ		
8		pation / Job title (See Instructions) se President, Client Engagement	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Kueneman, Kamie Contributor address; City; State; Zip Code	C (ID#:		•	Amount of Contribution (\$)	\$25.00
	Deinsinal assu	Eagan, MN 55121		Franks vou (Caa kaatu atiana	<u></u>		
			Employer (See Instructions Prime Therapeutics	5)			
	Date 03/29/2024	Full name of contributor out-of-state PAC Kueneman, Kamie Contributor address; City; State; Zip Code	C (ID#:			Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) ce President, Client Engagement		Employer (See Instructions Prime Therapeutics	s)		
	Date 04/12/2024	Full name of contributor out-of-state PAC Kueneman, Kamie Contributor address; City; State; Zip Code Eagan, MN 55121	C (ID#:	)	•	Amount of Contribution (\$)	\$25.00
	•	pation / Job title (See Instructions) ce President, Client Engagement		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/26/2024	Full name of contributor out-of-state PAC Kueneman, Kamie  Contributor address; City; State; Zip Code  Eagan, MN 55121	  C (ID#:	)		Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions) ce President, Client Engagement		Employer (See Instructions Prime Therapeutics	5)		
	regional vic	Transfer, One it Engagement		Time Therapeutics			

	MONEI	ARY POLITICAL CONTRIBUTION	ON	NS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 49/90 Rpt: 52/94	
2	FILER NAME Prime Thera	apeutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 05/10/2024	<ul> <li>Full name of contributor</li></ul>	E	)	7	Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
8		upation / Job title (See Instructions) ce President, Client Engagement	9	Employer (See Instructions Prime Therapeutics	s) 		
	Date 05/23/2024	Full name of contributor		)		Amount of Contribution (\$)	\$25.00
	Principal occu	Eagan, MN 55121 upation / Job title (See Instructions)	$\top$	Employer (See Instructions	  -  s)		
	Regional Vic	ce President, Client Engagement	$\perp$	Prime Therapeutics			
	Date 06/07/2024	Full name of contributor	t			Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
		upation / Job title (See Instructions) ce President, Client Engagement		Employer (See Instructions Prime Therapeutics	s)		
	Date 06/21/2024	Full name of contributor out-of-state PAC (ID# Kueneman, Kamie  Contributor address; City; State; Zip Code  Eagan, MN 55121	÷	)		Amount of Contribution (\$)	\$25.00
	•	upation / Job title (See Instructions) ce President, Client Engagement		Employer (See Instructions Prime Therapeutics	5)		
	Date 01/05/2024	Full name of contributor out-of-state PAC (ID# McIntosh, Shereese  Contributor address; City; State; Zip Code  Eagan, MN 55121	÷:	)		Amount of Contribution (\$)	\$12.50
		upation / Job title (See Instructions) rector, Medicaid Client Management		Employer (See Instructions Prime Therapeutics	5)		
			-				

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 50/90 Rpt: 53/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 01/19/2024	5 Full name of contributor out-of-state PAC (ID#:_ McIntosh, Shereese  6 Contributor address; City; State; Zip Code		)	7	Amount of Contribution (\$)	\$12.50
_		Eagan, MN 55121	1_		_		
8	•	pation / Job title (See Instructions) rector, Medicaid Client Management	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 02/02/2024	Full name of contributor out-of-state PAC (ID#:_McIntosh, Shereese  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$12.50
		Eagan, MN 55121	_		<u></u>		
	•	pation / Job title (See Instructions) rector, Medicaid Client Management		Employer (See Instructions Prime Therapeutics	s)		
	Date 02/16/2024	Full name of contributor out-of-state PAC (ID#:_ McIntosh, Shereese Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$12.50
		Eagan, MN 55121					
		pation / Job title (See Instructions) rector, Medicaid Client Management		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/01/2024	Full name of contributor out-of-state PAC (ID#:_McIntosh, Shereese  Contributor address; City; State; Zip Code  Eagan, MN 55121		)		Amount of Contribution (\$)	\$12.50
	•	pation / Job title (See Instructions) rector, Medicaid Client Management		Employer (See Instructions Prime Therapeutics	<u>                                      </u>		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_McIntosh, Shereese  Contributor address; City; State; Zip Code  Eagan, MN 55121				Amount of Contribution (\$)	\$12.50
	•	pation / Job title (See Instructions) rector, Medicaid Client Management		Employer (See Instructions Prime Therapeutics	5)		
	regional DII	ector, iniculcula Chent management	1	Time Therapeutics			

	MONET	ARY POLITICAL CONTRIBUTION	Λ	IS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this 1	orı	m.	1	Total pages Schedule A1: Sch: 51/90 Rpt: 54/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 03/29/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#: McIntosh, Shereese</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$12.50
_		Eagan, MN 55121	1_		<u></u>		
8	•	pation / Job title (See Instructions) ector, Medicaid Client Management	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 04/12/2024	Full name of contributor out-of-state PAC (ID#:_McIntosh, Shereese  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$12.50
		Eagan, MN 55121	_		<u></u>		
	•	pation / Job title (See Instructions) ector, Medicaid Client Management		Employer (See Instructions Prime Therapeutics	S)		
	Date 04/26/2024	Full name of contributor out-of-state PAC (ID#:_ McIntosh, Shereese Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$12.50
		Eagan, MN 55121					
		pation / Job title (See Instructions) ector, Medicaid Client Management		Employer (See Instructions Prime Therapeutics	s)		
	Date 05/10/2024	Full name of contributor out-of-state PAC (ID#:_ McIntosh, Shereese Contributor address; City; State; Zip Code  Eagan, MN 55121		)	•	Amount of Contribution (\$)	\$12.50
	•	pation / Job title (See Instructions) ector, Medicaid Client Management		Employer (See Instructions Prime Therapeutics	5)		
	Date 05/23/2024	Full name of contributor out-of-state PAC (ID#:_McIntosh, Shereese  Contributor address; City; State; Zip Code  Eagan, MN 55121		)		Amount of Contribution (\$)	\$12.50
	•	pation / Job title (See Instructions) ector, Medicaid Client Management		Employer (See Instructions Prime Therapeutics	s)		
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	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how t	to complete this for	rm.	1	Total pages Schedule A1: Sch: 52/90 Rpt: 55/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PA	AC		3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 06/07/2024	Full name of contributor     McIntosh, Shereese     Contributor address; City; State	out-of-state PAC (ID#: te; Zip Code	)	7	Amount of Contribution (\$)	\$12.50
		Eagan, MN 55121					
8		pation / Job title (See Instructions) rector, Medicaid Client Manager		Employer (See Instructions Prime Therapeutics	s) 		
	Date 06/21/2024	Full name of contributor  McIntosh, Shereese  Contributor address; City; Stat	out-of-state PAC (ID#: te; Zip Code		•	Amount of Contribution (\$)	\$12.50
_	Principal occu	Eagan, MN 55121  upation / Job title (See Instructions)		Employer (See Instructions	 		
		rector, Medicaid Client Manager	ment	Prime Therapeutics	,		
	Date 01/05/2024	Full name of contributor  Mendez Harper, LuGina  Contributor address; City; Stat	out-of-state PAC (ID#: te; Zip Code	)	•	Amount of Contribution (\$)	\$50.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) t Affairs Principal		Employer (See Instructions Prime Therapeutics	5)		
	Date 01/19/2024	Full name of contributor  Mendez Harper, LuGina  Contributor address; City; Stat  Eagan, MN 55121	out-of-state PAC (ID#: te; Zip Code	)	•	Amount of Contribution (\$)	\$50.00
	•	upation / Job title (See Instructions) t Affairs Principal		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/02/2024	Full name of contributor  Mendez Harper, LuGina  Contributor address; City; Stat  Eagan, MN 55121	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		pation / Job title (See Instructions) t Affairs Principal		Employer (See Instructions Prime Therapeutics	5)		
			-				

	MONET	ARY POLITICAL C	CONTRIBUTION	IS 		SCHEDULI	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 53/90 Rpt: 56/94	
2	FILER NAME Prime Thera	peutics LLC Employee State F	PAC		3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 02/16/2024	<ul><li>5 Full name of contributor</li><li>Mendez Harper, LuGina</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: ate; Zip Code		7	Amount of Contribution (\$)	\$50.00
		Eagan, MN 55121					
8		pation / Job title (See Instructions) Affairs Principal	9	Employer (See Instructions Prime Therapeutics	s)		
	Date 03/01/2024	Full name of contributor  Mendez Harper, LuGina  Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	<u> </u>		
		Affairs Principal		Prime Therapeutics	,		
	Date 03/15/2024	Full name of contributor  Mendez Harper, LuGina  Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) Affairs Principal		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/29/2024	Full name of contributor  Mendez Harper, LuGina  Contributor address; City; Sta  Eagan, MN 55121	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$50.00
	•	pation / Job title (See Instructions) Affairs Principal		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/12/2024	Full name of contributor  Mendez Harper, LuGina  Contributor address; City; Sta  Eagan, MN 55121	out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$50.00
		pation / Job title (See Instructions) Affairs Principal		Employer (See Instructions Prime Therapeutics	5)		
		·	I				

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 54/90 Rpt: 57/94	
2	FILER NAME Prime Thera	peutics LLC Employee State F	PAC		3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 04/26/2024	<ul><li>5 Full name of contributor</li><li>Mendez Harper, LuGina</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$50.00
_	<u> </u>	Eagan, MN 55121					
8		pation / Job title (See Instructions) t Affairs Principal	)	9 Employer (See Instructions Prime Therapeutics	s) 		
	Date 05/10/2024	Full name of contributor  Mendez Harper, LuGina  Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
_	Principal occu	Eagan, MN 55121  upation / Job title (See Instructions)	)	Employer (See Instructions	<u> </u> s)		
	Government	: Affairs Principal		Prime Therapeutics			
	Date 05/23/2024	Full name of contributor  Mendez Harper, LuGina  Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) Affairs Principal	)	Employer (See Instructions Prime Therapeutics	5)		
	Date 06/07/2024	Full name of contributor  Mendez Harper, LuGina  Contributor address; City; Sta  Eagan, MN 55121	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$50.00
		pation / Job title (See Instructions) Affairs Principal	)	Employer (See Instructions Prime Therapeutics	5)		
	Date 06/21/2024	Full name of contributor  Mendez Harper, LuGina  Contributor address; City; Sta  Eagan, MN 55121	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		ipation / Job title (See Instructions) t Affairs Principal	)	Employer (See Instructions Prime Therapeutics	5)		

	MONEI	ARY POLITICAL CONTRIBUTI	Or	NS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this	foi	rm.	1	Total pages Schedule A1: Sch: 55/90 Rpt: 58/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 01/05/2024	5 Full name of contributor out-of-state PAC (ID: Neumann, Kurt  6 Contributor address; City; State; Zip Code	#:	)	7	Amount of Contribution (\$)	\$5.00
_	Dain sin al a sau	Eagan, MN 55121	٦,	. Faralasas (Ossalasatas tisas	_		
8		pation / Job title (See Instructions) cords & Information Management (RIM)	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 01/19/2024	Full name of contributor	#:	)		Amount of Contribution (\$)	\$5.00
	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions)	_	Employer (See Instructions	;) 		
			Prime Therapeutics	P)			
	Date 02/02/2024	Full name of contributor out-of-state PAC (ID# Neumann, Kurt Contributor address; City; State; Zip Code	#:		•	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) cords & Information Management (RIM)		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/16/2024	Full name of contributor out-of-state PAC (ID# Neumann, Kurt Contributor address; City; State; Zip Code Eagan, MN 55121	#:		•	Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 03/01/2024	Full name of contributor out-of-state PAC (IDF Neumann, Kurt Contributor address; City; State; Zip Code  Eagan, MN 55121	#:	Prime Therapeutics		Amount of Contribution (\$)	\$5.00
		pation / Job title (See Instructions) cords & Information Management (RIM)		Employer (See Instructions Prime Therapeutics	5)		

	MONEI	ARY POLITICAL CONTRIBUTI	Or	NS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to complete this	for	rm.	1	Total pages Schedule A1: Sch: 56/90 Rpt: 59/94	
2	FILER NAME	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
_		<u> </u>	,		-	Amount of Contribution (\$)	
4	Date 03/15/2024	<ul> <li>Full name of contributor</li></ul>			' 	Amount of Contribution (\$)	\$5.00
0	Dringing Local	Eagan, MN 55121	ام	Employer (See Instructioner			
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Director, Red	cords & Information Management (RIM)		Prime Therapeutics			
	Date 03/29/2024	Full name of contributor out-of-state PAC (ID#  Neumann, Kurt  Contributor address; City; State; Zip Code	#:	)		Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u></u> 5)		
	Director, Red	cords & Information Management (RIM)		Prime Therapeutics			
	Date	Full name of contributor  out-of-state PAC (ID#	<u>+</u> .		Г	Amount of Contribution (\$)	
	04/12/2024	Neumann, Kurt				γ another of Continuation (φ)	\$5.00
		Contributor address; City; State; Zip Code					
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u></u> 5)		
	Director, Red	cords & Information Management (RIM)		Prime Therapeutics			
	Date	Full name of contributor out-of-state PAC (ID#	<sub>‡</sub> .	)	Π	Amount of Contribution (\$)	
	04/26/2024	Neumann, Kurt  Contributor address; City; State; Zip Code				(,)	\$5.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Director, Red	cords & Information Management (RIM)		Prime Therapeutics			
	Date	Full name of contributor  ut-of-state PAC (ID#	#:			Amount of Contribution (\$)	
	05/10/2024	Neumann, Kurt					\$5.00
		Contributor address; City; State; Zip Code Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Director, Red	cords & Information Management (RIM)		Prime Therapeutics			
			•				

	MONEI	ARY POLITICAL CONTRIBU	HOI	NS		SCHEDULE	A1
	The Instruc	ction Guide explains how to complete th	nis fo	rm.	1	Total pages Schedule A1: Sch: 57/90 Rpt: 60/94	
2	FILER NAME				3	•	Filers)
		peutics LLC Employee State PAC			L	00069403	
4	Date 05/23/2024	<ul> <li>Full name of contributor  out-of-state PAC (Neumann, Kurt</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$5.00
_		Eagan, MN 55121					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Director, Red	cords & Information Management (RIM)		Prime Therapeutics			
	Date 06/07/2024	Full name of contributor out-of-state PAC ( Neumann, Kurt  Contributor address; City; State; Zip Code	(ID#:		•	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Director, Red	cords & Information Management (RIM)		Prime Therapeutics			
	Date 06/21/2024	Full name of contributor out-of-state PAC ( Neumann, Kurt  Contributor address; City; State; Zip Code	(ID#:	)	•	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
		cords & Information Management (RIM)		Prime Therapeutics	,		
	Date 01/05/2024	Full name of contributor out-of-state PAC ( Neumiller, Alexzandria  Contributor address; City; State; Zip Code  Eagan, MN 55121	(ID#:		•	Amount of Contribution (\$)	\$5.00
	Principal occu Paralegal Sr	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	s)		
	Date 01/19/2024	Full name of contributor out-of-state PAC ( Neumiller, Alexzandria  Contributor address; City; State; Zip Code  Eagan, MN 55121	(ID#:		•	Amount of Contribution (\$)	\$5.00
	Principal occu Paralegal Sr	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 58/90 Rpt: 61/94	
2	FILER NAME Prime Thera	speutics LLC Employee State PAC		3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 02/02/2024	5 Full name of contributor out-of-state PAC (ID#:_ Neumiller, Alexzandria  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$5.00
_		Eagan, MN 55121				
8	Principal occu Paralegal Sr	pation / Job title (See Instructions)	9 Employer (See Instructions Prime Therapeutics	)		
	Date 02/16/2024	Full name of contributor out-of-state PAC (ID#:_ Neumiller, Alexzandria Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121				
	Principal occu Paralegal Sr	pation / Job title (See Instructions)	Employer (See Instructions Prime Therapeutics	)		
	Date 03/01/2024	Full name of contributor out-of-state PAC (ID#:_ Neumiller, Alexzandria Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121	_			
	Principal occu Paralegal Sr	upation / Job title (See Instructions)	Employer (See Instructions Prime Therapeutics	)		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Neumiller, Alexzandria Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Eagan, MN 55121 upation / Job title (See Instructions)	Employer (See Instructions	)		
	Paralegal Sr		Prime Therapeutics			
	Date 03/29/2024	Full name of contributor out-of-state PAC (ID#:_ Neumiller, Alexzandria Contributor address; City; State; Zip Code Eagan, MN 55121	)		Amount of Contribution (\$)	\$5.00
	Principal occu Paralegal Sr	upation / Job title (See Instructions)	Employer (See Instructions Prime Therapeutics	)		

	MONET	ARY POLITICAL (	CONTRIBUTION	IS		SCHEDULE	<b>A1</b>
	The Instruc	ction Guide explains hov	v to complete this for	m.	1	Total pages Schedule A1: Sch: 59/90 Rpt: 62/94	
2	FILER NAME Prime Thera	peutics LLC Employee State	PAC		3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 04/12/2024	<ul><li>5 Full name of contributor Neumiller, Alexzandria</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
8	Principal occu Paralegal Sr	pation / Job title (See Instruction:	9	Employer (See Instructions Prime Therapeutics	s) 		
	Date 04/26/2024	Full name of contributor Neumiller, Alexzandria Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121			Ĺ		
	Principal occul Paralegal Sr	pation / Job title (See Instructions	5)	Employer (See Instructions Prime Therapeutics	S)		
	Date 05/10/2024	Full name of contributor Neumiller, Alexzandria Contributor address; City; S	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	Principal occu Paralegal Sr	pation / Job title (See Instruction:	5)	Employer (See Instructions Prime Therapeutics	s)		
	Date 05/23/2024	Full name of contributor Neumiller, Alexzandria Contributor address; City; S Eagan, MN 55121		)		Amount of Contribution (\$)	\$5.00
	Principal occu Paralegal Sr	pation / Job title (See Instruction:	5)	Employer (See Instructions Prime Therapeutics	5)		
	Date 06/07/2024	Full name of contributor Neumiller, Alexzandria Contributor address; City; S Eagan, MN 55121	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
	Principal occu Paralegal Sr	pation / Job title (See Instructions	5)	Employer (See Instructions Prime Therapeutics	s)		
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	MONET	ARY POLITICAL CONTRIE	BUTION	IS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to comple	ete this for	n.	1	Total pages Schedule A1: Sch: 60/90 Rpt: 63/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 06/21/2024	<ul> <li>Full name of contributor</li></ul>	,	)	7	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
8	Principal occu Paralegal Sr	pation / Job title (See Instructions)	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 01/05/2024	Full name of contributor out-of-state Palmisano, Anthony  Contributor address; City; State; Zip Code	PAC (ID#:	)	•	Amount of Contribution (\$)	\$95.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) ate General Counsel MRx		Employer (See Instructions Prime Therapeutics	s)		
	Date 01/19/2024	Full name of contributor out-of-state Palmisano, Anthony Contributor address; City; State; Zip Code	PAC (ID#:	)	•	Amount of Contribution (\$)	\$95.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) ate General Counsel MRx		Employer (See Instructions Prime Therapeutics	s)		
	Date 02/02/2024	Palmisano, Anthony	PAC (ID#:	)		Amount of Contribution (\$)	\$95.00
	•	pation / Job title (See Instructions) ate General Counsel MRx		Employer (See Instructions Prime Therapeutics	<u>l</u> S)		
	Date 02/16/2024	Full name of contributor out-of-state Palmisano, Anthony  Contributor address; City; State; Zip Code  Eagan, MN 55121	PAC (ID#:	)		Amount of Contribution (\$)	\$95.00
		pation / Job title (See Instructions) ate General Counsel MRx		Employer (See Instructions Prime Therapeutics	5)		
	OVI ASSUE	ALC COTTOTAL COURTS OF IVITA		Time Therapeutics			

	MONEI	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 61/90 Rpt: 64/94	
2	FILER NAME	peutics LLC Employee State I	PAC		3	Filer ID (Ethics Commission 00069403	r Filers)
_		5 Full name of contributor			ļ_	Amount of Contribution (\$)	
4	Date 03/01/2024	Palmisano, Anthony  Contributor address; City; St	out-of-state PAC (ID#:		<b>'</b>	Amount of Contribution (\$)	\$95.00
Ω	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions	a	Employer (See Instructions			
0		ate General Counsel MRx	)	Prime Therapeutics	P)		
			<u> </u>	Filine Therapeutics	_		
	Date 03/15/2024	Full name of contributor Palmisano, Anthony Contributor address; City; St	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$95.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	SVP Associa	ate General Counsel MRx		Prime Therapeutics			
	Date 03/29/2024	Full name of contributor Palmisano, Anthony Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code	)		Amount of Contribution (\$)	\$95.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>.                                    </u>		
	SVP Associa	ate General Counsel MRx		Prime Therapeutics			
	Date 04/12/2024	Full name of contributor Palmisano, Anthony Contributor address; City; St Eagan, MN 55121	out-of-state PAC (ID#:_	)	•	Amount of Contribution (\$)	\$95.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	s)		
	SVP Associa	ate General Counsel MRx		Prime Therapeutics			
	Date 04/26/2024	Full name of contributor Palmisano, Anthony Contributor address; City; St Eagan, MN 55121	out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$95.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	SVP Associa	ate General Counsel MRx		Prime Therapeutics			
			,				

	MONET	ARY POLITICAL CONTRI	IBUTION	S		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to compl	ete this forr	n.	1	Total pages Schedule A1: Sch: 62/90 Rpt: 65/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 05/10/2024	<ul> <li>Full name of contributor  out-of-state  palmisano, Anthony</li> <li>Contributor address; City; State; Zip Code</li> </ul>	te PAC (ID#:	)	7	Amount of Contribution (\$)	\$95.00
_		Eagan, MN 55121	1-		_		
8		pation / Job title (See Instructions) ate General Counsel MRx	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 05/23/2024	Full name of contributor out-of-state Palmisano, Anthony  Contributor address; City; State; Zip Code	te PAC (ID#:			Amount of Contribution (\$)	\$95.00
		Eagan, MN 55121					
	•	pation / Job title (See Instructions) ate General Counsel MRx		Employer (See Instructions Prime Therapeutics	s)		
	Date 06/07/2024	Full name of contributor out-of-state Palmisano, Anthony  Contributor address; City; State; Zip Code	te PAC (ID#:		•	Amount of Contribution (\$)	\$95.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) ate General Counsel MRx		Employer (See Instructions Prime Therapeutics	s)		
	Date 06/21/2024	Palmisano, Anthony		)		Amount of Contribution (\$)	\$95.00
	•	pation / Job title (See Instructions) ate General Counsel MRx		Employer (See Instructions Prime Therapeutics	<u>I</u> S)		
	Date 01/05/2024	Renze, Mark	te PAC (ID#:			Amount of Contribution (\$)	\$5.00
		pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
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	MONEI	ARY POLITICAL CO	DNTRIBUTION	NS		SCHEDULE	A1
	The Instru	ction Guide explains how to	o complete this for	m.	1	Total pages Schedule A1: Sch: 63/90 Rpt: 66/94	
2	FILER NAME	mounties I.I.C. Empeloyee State DA			3	•	Filers)
		peutics LLC Employee State PA	_			00069403	
4	Date 01/19/2024	<ul><li>5 Full name of contributor Renze, Mark</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#: e; Zip Code		7	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	)		
	VP, Financia	l Planning & Analysis		Prime Therapeutics			
	Date 02/02/2024	Full name of contributor Renze, Mark Contributor address; City; State	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
		pation / Job title (See Instructions)		Employer (See Instructions	)		
	VP, Financia	ll Planning & Analysis		Prime Therapeutics			
	Date 02/16/2024	Full name of contributor  Renze, Mark  Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
		l Planning & Analysis		Prime Therapeutics			
	Date 03/01/2024	Full name of contributor Renze, Mark Contributor address; City; State Eagan, MN 55121	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions)		Employer (See Instructions	)		
	VP, Financia	l Planning & Analysis		Prime Therapeutics			
	Date 03/15/2024	Full name of contributor Renze, Mark Contributor address; City; State Eagan, MN 55121	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	VP, Financia	l Planning & Analysis		Prime Therapeutics			

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to complete th	his for	m.	1	Total pages Schedule A1: Sch: 64/90 Rpt: 67/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 03/29/2024	5 Full name of contributor out-of-state PAC Renze, Mark 6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$)	\$5.00
_		Eagan, MN 55121			_		
8		pation / Job title (See Instructions) al Planning & Analysis	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 04/12/2024	Full name of contributor			•	Amount of Contribution (\$)	\$5.00
	Deinsinal assu	Eagan, MN 55121			<u></u>		
	•	pation / Job title (See Instructions) al Planning & Analysis		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/26/2024	Full name of contributor out-of-state PAC Renze, Mark Contributor address; City; State; Zip Code	(ID#:	)		Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) al Planning & Analysis		Employer (See Instructions Prime Therapeutics	5)		
	Date 05/10/2024	Full name of contributor out-of-state PAC Renze, Mark Contributor address; City; State; Zip Code Eagan, MN 55121		)	•	Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) al Planning & Analysis		Employer (See Instructions Prime Therapeutics	5)		
	Date 05/23/2024	Full name of contributor out-of-state PAC Renze, Mark Contributor address; City; State; Zip Code  Eagan, MN 55121			•	Amount of Contribution (\$)	\$5.00
		pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL CONTRIE	BUTION	S		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complet	te this for	n.	1	Total pages Schedule A1: Sch: 65/90 Rpt: 68/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 06/07/2024	<ul> <li>Full name of contributor  out-of-state Renze, Mark</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$5.00
_		Eagan, MN 55121	1-		L		
8		pation / Job title (See Instructions) al Planning & Analysis	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 06/21/2024	Full name of contributor			•	Amount of Contribution (\$)	\$5.00
	Deinsinal assu	Eagan, MN 55121		Franks var (Caa Instructions			
	•	pation / Job title (See Instructions) al Planning & Analysis		Employer (See Instructions Prime Therapeutics	5)		
	Date 01/05/2024	Full name of contributor out-of-state Root, David Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$12.50
		Eagan, MN 55121					
		pation / Job title (See Instructions) nment Affairs		Employer (See Instructions Prime Therapeutics	s)		
	Date 01/19/2024	Full name of contributor out-of-state Root, David Contributor address; City; State; Zip Code Eagan, MN 55121	,	)		Amount of Contribution (\$)	\$12.50
	•	pation / Job title (See Instructions) nment Affairs		Employer (See Instructions Prime Therapeutics	<u>l</u> s)		
	Date 02/02/2024	Full name of contributor out-of-state Root, David Contributor address; City; State; Zip Code Eagan, MN 55121	PAC (ID#:			Amount of Contribution (\$)	\$12.50
	•	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL CONTRIB	BUTION	IS		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to complet	te this for	n.	1	Total pages Schedule A1: Sch: 66/90 Rpt: 69/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 02/16/2024	<ul> <li>Full name of contributor  out-of-state R</li> <li>Root, David</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	7	Amount of Contribution (\$)	\$12.50
_	5	Eagan, MN 55121		5 1 (0 1 1 1	<u></u>		
8	AVP, Govern	pation / Job title (See Instructions) nment Affairs	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 03/01/2024	Full name of contributor out-of-state F Root, David Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$12.50
	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions)		Employer (See Instructions	<u>:)</u>		
	AVP, Govern			Prime Therapeutics	"		
	Date 03/15/2024	Full name of contributor out-of-state F Root, David  Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$12.50
		Eagan, MN 55121					
		pation / Job title (See Instructions) nment Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/29/2024	Full name of contributor out-of-state F Root, David Contributor address; City; State; Zip Code Eagan, MN 55121	,	)	•	Amount of Contribution (\$)	\$12.50
	Principal occu AVP, Govern	pation / Job title (See Instructions) nment Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/12/2024	Full name of contributor out-of-state F Root, David Contributor address; City; State; Zip Code  Eagan, MN 55121		)	•	Amount of Contribution (\$)	\$12.50
	Principal occu AVP, Govern	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL CONTRI	BUTION	S		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to comple	ete this forr	m.	1	Total pages Schedule A1: Sch: 67/90 Rpt: 70/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	r Filers)
4	Date 04/26/2024	<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$12.50
_	District	Eagan, MN 55121	la la	Faralas as (October la structions	<u></u>		
8	AVP, Govern	pation / Job title (See Instructions) nment Affairs	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 05/10/2024	Root, David				Amount of Contribution (\$)	\$12.50
	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions)		Employer (See Instructions	<u>)                                    </u>		
	AVP, Govern			Prime Therapeutics	',		
	Date 05/23/2024	Full name of contributor	e PAC (ID#:	)		Amount of Contribution (\$)	\$12.50
		Eagan, MN 55121					
		pation / Job title (See Instructions) nment Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 06/07/2024	Root, David				Amount of Contribution (\$)	\$12.50
	Principal occu AVP, Govern	pation / Job title (See Instructions) nment Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 06/21/2024	Full name of contributor out-of-state Root, David Contributor address; City; State; Zip Code	te PAC (ID#:			Amount of Contribution (\$)	\$12.50
	Principal occu AVP, Govern	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to comp	plete this forr	n.	1	Total pages Schedule A1: Sch: 68/90 Rpt: 71/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	r Filers)
4	Date 01/05/2024	<ul> <li>Full name of contributor  out-of-s</li> <li>Schlett, David</li> <li>Contributor address; City; State; Zip Co</li> </ul>			7	Amount of Contribution (\$)	\$96.00
_	Deinsinal assu	Eagan, MN 55121	lo la	Franks on (Cooks to the state of			
8	Chief Financ	pation / Job title (See Instructions) ial Officer	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 01/19/2024	Full name of contributor out-of-s Schlett, David Contributor address; City; State; Zip Co		)		Amount of Contribution (\$)	\$96.00
		Eagan, MN 55121			Ĺ		
	Chief Financ	pation / Job title (See Instructions) ial Officer		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/02/2024	Full name of contributor out-of-s Schlett, David Contributor address; City; State; Zip Co	state PAC (ID#:	)		Amount of Contribution (\$)	\$96.00
		Eagan, MN 55121					
	Principal occu Chief Financ	pation / Job title (See Instructions) ial Officer		Employer (See Instructions Prime Therapeutics	s)		
	Date 02/16/2024	Schlett, David				Amount of Contribution (\$)	\$96.00
	Principal occu Chief Financ	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	<u>                                      </u>		
	Date 03/01/2024	Schlett, David	state PAC (ID#:	)		Amount of Contribution (\$)	\$96.00
	Principal occu Chief Financ	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDULI	<b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 69/90 Rpt: 72/94	
2	FILER NAME Prime Thera	peutics LLC Employee State F	PAC		3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 03/15/2024	<ul><li>5 Full name of contributor Schlett, David</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$96.00
8	Principal occu Chief Financ		) [9	Employer (See Instructions Prime Therapeutics	<u> </u> s)		
	Date 03/29/2024	Full name of contributor Schlett, David Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code	)		Amount of Contribution (\$)	\$96.00
	Principal occu Chief Financ	Eagan, MN 55121 pation / Job title (See Instructions ial Officer		Employer (See Instructions Prime Therapeutics	<u> </u> s)		
	Date 04/12/2024	Full name of contributor Schlett, David Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code	)	•	Amount of Contribution (\$)	\$96.00
	Deinsinal	Eagan, MN 55121		Faralayay (Caa Jaakuyatia na	_		
	Chief Financ	pation / Job title (See Instructions ial Officer		Employer (See Instructions Prime Therapeutics	·)		
	Date 04/26/2024	Full name of contributor Schlett, David Contributor address; City; St Eagan, MN 55121	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$96.00
	Principal occu Chief Financ	pation / Job title (See Instructions		Employer (See Instructions Prime Therapeutics	<u>l</u> S)		
	Date 05/10/2024	Full name of contributor Schlett, David Contributor address; City; St	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$96.00
	Principal occu Chief Financ	pation / Job title (See Instructions ial Officer		Employer (See Instructions Prime Therapeutics	5)		

	MONEI	ARY POLITICAL CO	ONTRIBUTION	NS		SCHEDULI	<b>E A1</b>
	The Instru	ction Guide explains how t	o complete this fo	rm.	1	Total pages Schedule A1: Sch: 70/90 Rpt: 73/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PA	AC		3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 05/23/2024	5 Full name of contributor Schlett, David  6 Contributor address; City; Stat	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$96.00
8	Principal occu Chief Financ		9	Employer (See Instructions Prime Therapeutics	;)		
	Date 06/07/2024	Full name of contributor  Schlett, David  Contributor address; City; Stat	out-of-state PAC (ID#: e; Zip Code	)		Amount of Contribution (\$)	\$96.00
	Principal occu Chief Financ	pation / Job title (See Instructions) ial Officer		Employer (See Instructions Prime Therapeutics	5)		
	Date 06/21/2024	Full name of contributor  Schlett, David  Contributor address; City; Stat	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$)	\$96.00
		Eagan, MN 55121					
	Chief Financ	pation / Job title (See Instructions) cial Officer		Employer (See Instructions Prime Therapeutics	5)		
	Date 01/05/2024	Full name of contributor Soma, John Contributor address; City; Stat	out-of-state PAC (ID#: e; Zip Code	)		Amount of Contribution (\$)	\$12.50
		pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 01/19/2024	Full name of contributor  Soma, John  Contributor address; City; Stat  Eagan, MN 55121	out-of-state PAC (ID#: e; Zip Code	Prime Therapeutics		Amount of Contribution (\$)	\$12.50
	Principal occu Director of T	pation / Job title (See Instructions) raining		Employer (See Instructions Prime Therapeutics	)		

	MONEI	DNETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 71/90 Rpt: 74/94		
2	FILER NAME				3	Filer ID (Ethics Commission	r Filers)	
	Prime Thera	peutics LLC Employee State P	AC			00069403		
4	Date 02/02/2024	<ul><li>5 Full name of contributor Soma, John</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: tte; Zip Code	)	7	Amount of Contribution (\$)	\$12.50	
		Eagan, MN 55121						
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	<u></u>			
	Director of T	raining		Prime Therapeutics				
	Date 02/16/2024	Full name of contributor  Soma, John  Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code	)		Amount of Contribution (\$)	\$12.50	
		Eagan, MN 55121						
		pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Director of Training			Prime Therapeutics				
	Date 03/01/2024	Full name of contributor Soma, John Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code	)		Amount of Contribution (\$)	\$12.50	
		Eagan, MN 55121						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>                                      </u>			
	Director of T			Prime Therapeutics				
	Date 03/15/2024	Full name of contributor  Soma, John  Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$12.50	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Director of T	raining		Prime Therapeutics				
	Date 03/29/2024	Full name of contributor Soma, John Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$12.50	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)			
	Director of T	raining		Prime Therapeutics				

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDULI	E <b>A1</b>
	The Instruc	ction Guide explains how to comp	lete this forr	m.	1	Total pages Schedule A1: Sch: 72/90 Rpt: 75/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	r Filers)
4	Date 04/12/2024	<u> </u>		)	7	Amount of Contribution (\$)	\$12.50
_	<u> </u>	Eagan, MN 55121			<u></u>		
8	Director of T	pation / Job title (See Instructions) raining	9	Employer (See Instructions Prime Therapeutics	<del></del>		
	Date 04/26/2024	Soma, John				Amount of Contribution (\$)	\$12.50
	Dringinal occu	Eagan, MN 55121 pation / Job title (See Instructions)		Employer (See Instructions	·/-		
	Director of T			Prime Therapeutics	)		
	Date 05/10/2024	Full name of contributor out-of-sta Soma, John Contributor address; City; State; Zip Cod	ate PAC (ID#:	)		Amount of Contribution (\$)	\$12.50
		Eagan, MN 55121					
	Principal occu Director of T	pation / Job title (See Instructions) raining		Employer (See Instructions Prime Therapeutics	5)		
	Date 05/23/2024	Soma, John				Amount of Contribution (\$)	\$12.50
	Principal occu Director of T	pation / Job title (See Instructions) raining		Employer (See Instructions Prime Therapeutics	<u>(</u>		
	Date 06/07/2024	Soma, John		)		Amount of Contribution (\$)	\$12.50
	Principal occu Director of T	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL CON	ITRIBUTION	S		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to c	omplete this form	m.	1	Total pages Schedule A1: Sch: 73/90 Rpt: 76/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 06/21/2024	5 Full name of contributor ou Soma, John	t-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$12.50
_		Eagan, MN 55121			_		
8	Director of T	pation / Job title (See Instructions) raining	9	Employer (See Instructions Prime Therapeutics	<del></del>		
	Date 01/05/2024	Full name of contributor ou Sosinski, Kiera Contributor address; City; State; Zi				Amount of Contribution (\$)	\$6.00
		Eagan, MN 55121			<u></u>		
		pation / Job title (See Instructions) ess Execution		Employer (See Instructions Prime Therapeutics	5)		
	Date 01/19/2024	Full name of contributor ou Sosinski, Kiera Contributor address; City; State; Zi	t-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$6.00
		Eagan, MN 55121					
	•	pation / Job title (See Instructions) ess Execution		Employer (See Instructions Prime Therapeutics	s)		
	Date 02/02/2024	Full name of contributor ou Sosinski, Kiera Contributor address; City; State; Zi Eagan, MN 55121	t-of-state PAC (ID#: p Code			Amount of Contribution (\$)	\$6.00
		pation / Job title (See Instructions) ss Execution		Employer (See Instructions Prime Therapeutics	<u> </u> 5)		
	Date 02/16/2024	Full name of contributor ou Sosinski, Kiera Contributor address; City; State; Zij Eagan, MN 55121	t-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$6.00
	•	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL CONT	TRIBUTION	S		SCHEDULE	<b>A1</b>
	The Instruc	ction Guide explains how to co	mplete this forr	m.	1	Total pages Schedule A1: Sch: 74/90 Rpt: 77/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 03/01/2024	Sosinski, Kiera	of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$6.00
_		Eagan, MN 55121	<u> </u>				
8	AVP, Busine	pation / Job title (See Instructions) ss Execution	9	Employer (See Instructions Prime Therapeutics	5) 		
	Date 03/15/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-				Amount of Contribution (\$)	\$6.00
	<u> </u>	Eagan, MN 55121			<u></u>		
	AVP, Busine	pation / Job title (See Instructions) ss Execution		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/29/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:	)		Amount of Contribution (\$)	\$6.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) ss Execution		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/12/2024	Sosinski, Kiera	of-state PAC (ID#:	)		Amount of Contribution (\$)	\$6.00
	•	pation / Job title (See Instructions) ss Execution		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/26/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:	)		Amount of Contribution (\$)	\$6.00
	•	pation / Job title (See Instructions) ss Execution		Employer (See Instructions Prime Therapeutics	5)		
	,						

	MONEI	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 75/90 Rpt: 78/94	
2	FILER NAME Prime Thera	peutics LLC Employee State I	PAC		3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 05/10/2024	Full name of contributor     Sosinski, Kiera     Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$6.00
8		Eagan, MN 55121 pation / Job title (See Instructionses Execution	)	Employer (See Instructions     Prime Therapeutics	<u> </u> 5)		
	Date 05/23/2024	Full name of contributor Sosinski, Kiera  Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$6.00
		Eagan, MN 55121 pation / Job title (See Instructionses Execution	)	Employer (See Instructions Prime Therapeutics	<u> </u> ;)		
	Date 06/07/2024	Full name of contributor Sosinski, Kiera Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code	)		Amount of Contribution (\$)	\$6.00
		Eagan, MN 55121	, Γ		<u></u>		
		pation / Job title (See Instructions ess Execution	)	Employer (See Instructions Prime Therapeutics	5)		
	Date 06/21/2024	Full name of contributor Sosinski, Kiera Contributor address; City; St Eagan, MN 55121	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$6.00
	•	pation / Job title (See Instructionsess Execution	)	Employer (See Instructions Prime Therapeutics	<u>l</u> 5)		
	Date 01/05/2024	Full name of contributor Sutton, Angela Contributor address; City; St Eagan, MN 55121	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
		pation / Job title (See Instructions Affairs Policy Director	)	Employer (See Instructions Prime Therapeutics	s)		

	MONET	ARY POLITICAL CONTRIBU	ITION	IS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete t	his for	m.	1	Total pages Schedule A1: Sch: 76/90 Rpt: 79/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 01/19/2024	<ul> <li>Full name of contributor  out-of-state PAC Sutton, Angela</li> <li>Contributor address; City; State; Zip Code</li> </ul>	: (ID#:	)	7	Amount of Contribution (\$)	\$10.00
_		Eagan, MN 55121			_		
8		pation / Job title (See Instructions)  Affairs Policy Director	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 02/02/2024	Full name of contributor out-of-state PAC Sutton, Angela  Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$10.00
	Dringing aggr	Eagan, MN 55121		Employer (Cool patruations	<u></u>		
	•	pation / Job title (See Instructions)  Affairs Policy Director		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/16/2024	Full name of contributor out-of-state PAC Sutton, Angela Contributor address; City; State; Zip Code	(ID#:	)		Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
		pation / Job title (See Instructions)  Affairs Policy Director		Employer (See Instructions Prime Therapeutics	s)		
	Date 03/01/2024	Full name of contributor out-of-state PAC Sutton, Angela Contributor address; City; State; Zip Code Eagan, MN 55121		)		Amount of Contribution (\$)	\$10.00
	•	pation / Job title (See Instructions)  Affairs Policy Director		Employer (See Instructions Prime Therapeutics	<u> </u> 5)		
	Date 03/15/2024	Full name of contributor out-of-state PAC Sutton, Angela Contributor address; City; State; Zip Code  Eagan, MN 55121	I (ID#:	)		Amount of Contribution (\$)	\$10.00
		pation / Job title (See Instructions)  Affairs Policy Director		Employer (See Instructions Prime Therapeutics	5)		
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	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 77/90 Rpt: 80/94	
2	FILER NAME	· · · · · · · · · · · · · · · · · · ·	10		3	Filer ID (Ethics Commission	r Filers)
		peutics LLC Employee State P				00069403	
4	Date 03/29/2024	<ul><li>5 Full name of contributor [ Sutton, Angela</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: te; Zip Code	)	7	Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	()		
	Government	Affairs Policy Director		Prime Therapeutics			
	Date 04/12/2024	Full name of contributor Sutton, Angela Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
		pation / Job title (See Instructions)		Employer (See Instructions	<b>(</b> )		
	Government Affairs Policy Director			Prime Therapeutics			
	Date 04/26/2024	Full name of contributor [ Sutton, Angela Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code	)		Amount of Contribution (\$)	\$10.00
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Government	Affairs Policy Director		Prime Therapeutics			
	Date 05/10/2024	Full name of contributor Sutton, Angela Contributor address; City; Sta Eagan, MN 55121	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	•	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Government	Affairs Policy Director		Prime Therapeutics			
	Date 05/23/2024	Full name of contributor Sutton, Angela Contributor address; City; Sta Eagan, MN 55121	out-of-state PAC (ID#: te; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	·)		
	Government	Affairs Policy Director		Prime Therapeutics			

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDULI	<b>■ A1</b>
	The Instru	ction Guide explains how to	o complete this form	n.	1	Total pages Schedule A1: Sch: 78/90 Rpt: 81/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PA	С		3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 06/07/2024	<ul><li>5 Full name of contributor Sutton, Angela</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#: e; Zip Code		7	Amount of Contribution (\$)	\$10.00
_		Eagan, MN 55121	10		<u></u>		
8		pation / Job title (See Instructions) Affairs Policy Director	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 06/21/2024	Full name of contributor  Sutton, Angela  Contributor address; City; State				Amount of Contribution (\$)	\$10.00
	Deinsinal assu	Eagan, MN 55121		Frankrian (Can Instructions	<u></u>		
	•	pation / Job title (See Instructions) Affairs Policy Director		Employer (See Instructions Prime Therapeutics	5)		
	Date 01/05/2024	Full name of contributor  Swartzberg, Lindsey  Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$30.00
		Eagan, MN 55121					
	Principal occu Government	pation / Job title (See Instructions) Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 01/19/2024	Full name of contributor Swartzberg, Lindsey Contributor address; City; State Eagan, MN 55121				Amount of Contribution (\$)	\$30.00
	Principal occu Government	pation / Job title (See Instructions) Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/02/2024	Full name of contributor  Swartzberg, Lindsey  Contributor address; City; State  Eagan, MN 55121	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$)	\$30.00
	Principal occu Government	pation / Job title (See Instructions) Affairs		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 79/90 Rpt: 82/94	
2	FILER NAME Prime Thera	peutics LLC Employee State F	PAC		3	Filer ID (Ethics Commission 00069403	r Filers)
4	Date 02/16/2024	<ul><li>5 Full name of contributor Swartzberg, Lindsey</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$30.00
_	5	Eagan, MN 55121		5 1 (0 1 1 1	<u></u>		
8	Government	pation / Job title (See Instructions) Affairs	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 03/01/2024	Full name of contributor Swartzberg, Lindsey Contributor address; City; Sta		)		Amount of Contribution (\$)	\$30.00
	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions)		Employer (See Instructions	<u>;)</u>		
	Government			Prime Therapeutics	-,		
	Date 03/15/2024	Full name of contributor Swartzberg, Lindsey Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$30.00
		Eagan, MN 55121					
	Principal occu Government	pation / Job title (See Instructions Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 03/29/2024	Full name of contributor Swartzberg, Lindsey Contributor address; City; Sta		)	•	Amount of Contribution (\$)	\$30.00
	Principal occu Government	pation / Job title (See Instructions) Affairs		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/12/2024	Full name of contributor Swartzberg, Lindsey Contributor address; City; Sta	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$30.00
	Principal occu Government	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how	to complete this for	rn	n.	1	Total pages Schedule A1: Sch: 80/90 Rpt: 83/94	
2	FILER NAME Prime Thera	peutics LLC Employee State F	PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 04/26/2024	<ul><li>5 Full name of contributor Swartzberg, Lindsey</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:		)	7	Amount of Contribution (\$)	\$30.00
_	Deignaignal	Eagan, MN 55121	\	_	Franks or (Cook both sticks			
8	Government	pation / Job title (See Instructions Affairs	) 9		Employer (See Instructions Prime Therapeutics	5)		
	Date 05/10/2024	Full name of contributor Swartzberg, Lindsey Contributor address; City; St			)		Amount of Contribution (\$)	\$30.00
	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions	) I		Employer (See Instructions	;) 		
	Government		,		Prime Therapeutics	,,		
	Date 05/23/2024	Full name of contributor Swartzberg, Lindsey Contributor address; City; St	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$30.00
		Eagan, MN 55121						
	Principal occu Government	pation / Job title (See Instructions Affairs	)		Employer (See Instructions Prime Therapeutics	5)		
	Date 06/07/2024	Full name of contributor Swartzberg, Lindsey Contributor address; City; St Eagan, MN 55121			)		Amount of Contribution (\$)	\$30.00
	Principal occu Government	pation / Job title (See Instructions Affairs			Employer (See Instructions Prime Therapeutics	<u>.                                    </u>		
	Date 06/21/2024	Full name of contributor Swartzberg, Lindsey Contributor address; City; St Eagan, MN 55121	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$30.00
	Principal occu Government	pation / Job title (See Instructions	)		Employer (See Instructions Prime Therapeutics	5)		
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	MONEI	ARY POLITICAL CONTRIBU	HOI	NS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete t	his fo	rm.	1	Total pages Schedule A1: Sch: 81/90 Rpt: 84/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 01/05/2024	6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$)	\$25.00
_	Dringing con	Eagan, MN 55121	10	- Employer (Coo Instructions	<u></u>		
8		pation / Job title (See Instructions) : & Litigation Senior Legal Counsel	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 01/19/2024	Full name of contributor out-of-state PAC Taber, Amy Contributor address; City; State; Zip Code	(ID#:			Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
	•	pation / Job title (See Instructions) : & Litigation Senior Legal Counsel		Employer (See Instructions Prime Therapeutics	s)		
	Date 02/02/2024	Full name of contributor out-of-state PAC Taber, Amy Contributor address; City; State; Zip Code	(ID#:			Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) : & Litigation Senior Legal Counsel		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/16/2024	Full name of contributor out-of-state PAC Taber, Amy Contributor address; City; State; Zip Code Eagan, MN 55121	(ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Employment	& Litigation Senior Legal Counsel		Prime Therapeutics			
	Date 03/01/2024	Full name of contributor out-of-state PAC Taber, Amy Contributor address; City; State; Zip Code  Eagan, MN 55121		)		Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Employment	: & Litigation Senior Legal Counsel		Prime Therapeutics			

	MONEI	ARY POLITICAL CONTRIBU	JHOI	NS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete t	this fo	rm.	1	Total pages Schedule A1: Sch: 82/90 Rpt: 85/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	n Filers)
4	Date 03/15/2024	6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$)	\$25.00
_	Dringing Loggy	Eagan, MN 55121	اما	- Employer (Coo Instructions	<u></u>		
0		pation / Job title (See Instructions)  & Litigation Senior Legal Counsel	l <sup>9</sup>	Employer (See Instructions Prime Therapeutics	>)		
	Date 03/29/2024	Full name of contributor out-of-state PAC Taber, Amy Contributor address; City; State; Zip Code	C (ID#:			Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
	•	pation / Job title (See Instructions)  & Litigation Senior Legal Counsel		Employer (See Instructions Prime Therapeutics	s)		
	Date	Full name of contributor out-of-state PAC	C (ID#:	1 Time Therapeutics		Amount of Contribution (\$)	
	04/12/2024	Taber, Amy  Contributor address; City; State; Zip Code				(4)	\$25.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) & Litigation Senior Legal Counsel		Employer (See Instructions Prime Therapeutics	5)		
	Date 01/05/2024	Full name of contributor out-of-state PACTAM, Brian  Contributor address; City; State; Zip Code  Eagan, MN 55121	C (ID#:	)	•	Amount of Contribution (\$)	\$2.50
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Records & Ir	nformation Management Analyst		Prime Therapeutics			
	Date 01/19/2024	Full name of contributor out-of-state PAC Tam, Brian Contributor address; City; State; Zip Code  Eagan, MN 55121	C (ID#:	)		Amount of Contribution (\$)	\$2.50
		pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Records & Ir	nformation Management Analyst		Prime Therapeutics			

	MONEI	ARY POLITICAL CONTRIBUTION	יוכ	NS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this t	for	m.	1	Total pages Schedule A1: Sch: 83/90 Rpt: 86/94	
2	FILER NAME	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
_		· · · · · · · · · · · · · · · · · · ·			_		
4	Date 02/02/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#: Tam, Brian</li> <li>Contributor address; City; State; Zip Code</li> </ul>		)	,	Amount of Contribution (\$)	\$2.50
		Eagan, MN 55121	_				
8		pation / Job title (See Instructions)	9	Employer (See Instructions	<b>(</b> )		
	Records & Ir	nformation Management Analyst		Prime Therapeutics			
	Date 02/16/2024	Full name of contributor out-of-state PAC (ID#: Tam, Brian Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$2.50
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Records & Ir	nformation Management Analyst		Prime Therapeutics			
	Date 03/01/2024	Full name of contributor out-of-state PAC (ID#:_ Tam, Brian  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$2.50
		Eagan, MN 55121					
	Principal occu	pation / Job title (See Instructions)	Т	Employer (See Instructions	<u> </u>		
		nformation Management Analyst		Prime Therapeutics	,		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID#:_ Tam, Brian Contributor address; City; State; Zip Code  Eagan, MN 55121				Amount of Contribution (\$)	\$2.50
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Records & Ir	nformation Management Analyst		Prime Therapeutics			
	Date 03/29/2024	Full name of contributor out-of-state PAC (ID#:_Tam, Brian  Contributor address; City; State; Zip Code  Eagan, MN 55121		)		Amount of Contribution (\$)	\$2.50
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
		nformation Management Analyst		Prime Therapeutics			
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	MONEI	ARY POLITICAL CONTRIBUTION	Or	NS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this	for	rm.	1	Total pages Schedule A1: Sch: 84/90 Rpt: 87/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4		<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$2.50
_	Dringing Loggy	Eagan, MN 55121	٦,	Employer (Coo Instructions	<u></u>		
8		pation / Job title (See Instructions) nformation Management Analyst	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 04/26/2024	Full name of contributor out-of-state PAC (ID# Tam, Brian  Contributor address; City; State; Zip Code	<u> </u>			Amount of Contribution (\$)	\$2.50
		Eagan, MN 55121					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
		nformation Management Analyst		Prime Therapeutics	_		
	Date 05/10/2024	Full name of contributor				Amount of Contribution (\$)	\$2.50
		Eagan, MN 55121					
		pation / Job title (See Instructions)  nformation Management Analyst		Employer (See Instructions Prime Therapeutics	5)		
	Date 05/23/2024	Full name of contributor out-of-state PAC (ID# Tam, Brian  Contributor address; City; State; Zip Code  Eagan, MN 55121	:			Amount of Contribution (\$)	\$2.50
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Records & Ir	nformation Management Analyst		Prime Therapeutics			
	Date 06/07/2024	Full name of contributor out-of-state PAC (ID# Tam, Brian Contributor address; City; State; Zip Code Eagan, MN 55121	:			Amount of Contribution (\$)	\$2.50
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Records & Ir	nformation Management Analyst		Prime Therapeutics			

	MONET	ARY POLITICAL CONTRIBUT	ION	IS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 85/90 Rpt: 88/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 06/21/2024	<ul> <li>Full name of contributor</li></ul>	#:		7	Amount of Contribution (\$)	\$2.50
		Eagan, MN 55121					
8		pation / Job title (See Instructions)  nformation Management Analyst	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 01/05/2024	Full name of contributor out-of-state PAC (ID Thompson, Hannah  Contributor address; City; State; Zip Code	#:		•	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) rnment Affairs Policy Analyst		Employer (See Instructions Prime Therapeutics	s)		
	Date 01/19/2024	Full name of contributor out-of-state PAC (ID Thompson, Hannah  Contributor address; City; State; Zip Code	#:			Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) rnment Affairs Policy Analyst		Employer (See Instructions Prime Therapeutics	s)		
	Date 02/02/2024	Full name of contributor out-of-state PAC (ID Thompson, Hannah  Contributor address; City; State; Zip Code  Eagan, MN 55121				Amount of Contribution (\$)	\$5.00
		pation / Job title (See Instructions) rnment Affairs Policy Analyst		Employer (See Instructions Prime Therapeutics	5)		
	Date 02/16/2024	Full name of contributor out-of-state PAC (ID Thompson, Hannah  Contributor address; City; State; Zip Code  Eagan, MN 55121	#:			Amount of Contribution (\$)	\$5.00
	·	pation / Job title (See Instructions) rnment Affairs Policy Analyst		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL CONTRIBUT	ION	NS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this	s for	m.	1	Total pages Schedule A1: Sch: 86/90 Rpt: 89/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 03/01/2024	<ul> <li>Full name of contributor</li></ul>	D#:	)	7	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
8		pation / Job title (See Instructions) rnment Affairs Policy Analyst	9	Employer (See Instructions Prime Therapeutics	s) 		
	Date 03/15/2024	Full name of contributor out-of-state PAC (ID Thompson, Hannah  Contributor address; City; State; Zip Code	)#:	)		Amount of Contribution (\$)	\$5.00
	Dringing agg	Eagan, MN 55121 pation / Job title (See Instructions)	_	Employer (Coo Instructions	<u></u>		
		rnment Affairs Policy Analyst		Employer (See Instructions Prime Therapeutics	o)		
	Date 03/29/2024	Full name of contributor out-of-state PAC (ID Thompson, Hannah Contributor address; City; State; Zip Code	)#:	)	•	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
		pation / Job title (See Instructions) rnment Affairs Policy Analyst		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/12/2024	Full name of contributor out-of-state PAC (ID Thompson, Hannah Contributor address; City; State; Zip Code Eagan, MN 55121		)	•	Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) rnment Affairs Policy Analyst		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/26/2024	Full name of contributor out-of-state PAC (ID Thompson, Hannah  Contributor address; City; State; Zip Code  Eagan, MN 55121	<b>)</b> #:		•	Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) rnment Affairs Policy Analyst		Employer (See Instructions Prime Therapeutics	5)		
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	MONET	ARY POLITICAL CONTRIBUT	ION	IS		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to complete this	s for	m.	1	Total pages Schedule A1: Sch: 87/90 Rpt: 90/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PAC			3	Filer ID (Ethics Commission 00069403	Filers)
4	Date 05/10/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID Thompson, Hannah</li> <li>Contributor address; City; State; Zip Code</li> </ul>	)#:	)	7	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
8		pation / Job title (See Instructions) rnment Affairs Policy Analyst	9	Employer (See Instructions Prime Therapeutics	5)		
	Date 05/23/2024	Full name of contributor	)#:		•	Amount of Contribution (\$)	\$5.00
	Principal occu	Eagan, MN 55121 pation / Job title (See Instructions)	_	Employer (See Instructions	<u>''</u>		
		rnment Affairs Policy Analyst		Prime Therapeutics	·)		
	Date 06/07/2024	Full name of contributor out-of-state PAC (ID Thompson, Hannah Contributor address; City; State; Zip Code	)#:	)	•	Amount of Contribution (\$)	\$5.00
		Eagan, MN 55121					
	•	pation / Job title (See Instructions) rnment Affairs Policy Analyst		Employer (See Instructions Prime Therapeutics	5)		
	Date 06/21/2024	Full name of contributor out-of-state PAC (ID Thompson, Hannah  Contributor address; City; State; Zip Code  Eagan, MN 55121		)		Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions) rnment Affairs Policy Analyst		Employer (See Instructions Prime Therapeutics	<u>I</u> S)		
	Date 01/05/2024	Full name of contributor out-of-state PAC (ID Van Buren, Daphne Contributor address; City; State; Zip Code Eagan, MN 55121	)#:			Amount of Contribution (\$)	\$25.00
	Principal occu Senior Legal	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
	Somor Logar	. 552551		e . merapeutico			

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDULE	<b>■ A1</b>
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 88/90 Rpt: 91/94	
2	FILER NAME Prime Thera	peutics LLC Employee State PA			3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 01/19/2024	<ul><li>5 Full name of contributor</li><li>Van Buren, Daphne</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$25.00
_		Eagan, MN 55121	10	5 1 (0 1 i ii			
8	Principal occu Senior Legal	pation / Job title (See Instructions) I Counsel	9	Employer (See Instructions Prime Therapeutics	<u></u>		
	Date 02/02/2024	Full name of contributor  Van Buren, Daphne  Contributor address; City; State	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
	Principal occu Senior Legal	pation / Job title (See Instructions) I Counsel		Employer (See Instructions Prime Therapeutics	i)		
	Date 02/16/2024	Full name of contributor  Van Buren, Daphne  Contributor address; City; State	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
	Principal occu Senior Legal	pation / Job title (See Instructions) I Counsel		Employer (See Instructions Prime Therapeutics	i)		
	Date 03/01/2024	Full name of contributor  Van Buren, Daphne  Contributor address; City; State  Eagan, MN 55121	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Senior Legal	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	<u> </u>		
	Date 03/15/2024	Full name of contributor  Van Buren, Daphne  Contributor address; City; State  Eagan, MN 55121	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	Principal occu Senior Legal	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
	Somor Logar						

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDULE	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 89/90 Rpt: 92/94	
2	FILER NAME Prime Thera	peutics LLC Employee State P.	AC		3	Filer ID (Ethics Commission 00069403	ı Filers)
4	Date 03/29/2024	<ul><li>5 Full name of contributor [ Van Buren, Daphne</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: te; Zip Code	)	7	Amount of Contribution (\$)	\$25.00
	Dringing age	Eagan, MN 55121	10	Employer (Coo Instructions	<u></u>		
8	Senior Legal	pation / Job title (See Instructions) I Counsel	9	Employer (See Instructions Prime Therapeutics	·)		
	Date 04/12/2024	Full name of contributor  Van Buren, Daphne  Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121	1		<u> </u>		
	Senior Legal	pation / Job title (See Instructions) I Counsel		Employer (See Instructions Prime Therapeutics	5)		
	Date 04/26/2024	Full name of contributor  Van Buren, Daphne  Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
		Eagan, MN 55121					
	Principal occu Senior Legal	pation / Job title (See Instructions) I Counsel		Employer (See Instructions Prime Therapeutics	5)		
	Date 05/10/2024	Full name of contributor  Van Buren, Daphne  Contributor address; City; Sta  Eagan, MN 55121	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu Senior Legal	pation / Job title (See Instructions) I Counsel		Employer (See Instructions Prime Therapeutics	<u>(</u>		
	Date 05/23/2024	Full name of contributor  Van Buren, Daphne  Contributor address; City; Sta  Eagan, MN 55121	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Senior Legal	pation / Job title (See Instructions)		Employer (See Instructions Prime Therapeutics	5)		
	22		<u> </u>				

MON	ETARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
The In:	struction Guide explains how to complete this t	form.	1 Total pages Schedule A1: Sch: 90/90 Rpt: 93/94
	FILER NAME Prime Therapeutics LLC Employee State PAC		3 Filer ID (Ethics Commission Filers) 00069403
4 Date 06/07/2	5 Full name of contributor out-of-state PAC (ID#: Van Buren, Daphne  6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$25.0
8 Principal	Eagan, MN 55121 occupation / Job title (See Instructions)	9 Employer (See Instructions	ns)
	egal Counsel	Prime Therapeutics	110)
Date 06/21/2	Full name of contributor out-of-state PAC (ID#:_024		Amount of Contribution (\$) \$25.0
	Eagan, MN 55121		
	occupation / Job title (See Instructions) .egal Counsel	Employer (See Instructions Prime Therapeutics	ns)
Date 03/29/2	Contributor address; City; State; Zip Code	)	Amount of Contribution (\$)
Principal	Eagan, MN 55121 occupation / Job title (See Instructions)	Employer (See Instructions	ns)
VP, Bus	iness Development	Prime Therapeutics	

## POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

## SCHEDULE F1

## **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	By - Gift/Awards/Memorials Expense Printing Expense cal Committee Legal Services Salaries/Wages/Contract La  The Instruction Guide explains how to complete this for	
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 94/94	Prime Therapeutics LLC Employee State PAC	00069403
4 Date	5 Payee name	·
06/10/2024	Florida Insurance Council (FIC) Political Committee	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$5,000.00	150 S. Monroe St, Suite 206	
Expenditure from corporate funds	Tallahassee, FL 32301	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	on
OF		if travel outside of Texas. Complete Schedule T.
EXPENDITURE		if Austin, TX, officeholder living expense
	Contribu	ution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		