

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

ADDRESS (number and street) LILLY CORPORATE CENTER
 Check if different than previously reported. (ACC)
INDIANAPOLIS IN 46285

2. **FEC IDENTIFICATION NUMBER** C00082792
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 02 01 2007 through 02 28 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Marvin White

Signature of Treasurer Electronically Filed by Marvin White Date 03 20 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		426778.86
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	486527.13									
(c) Total Receipts (from Line 19)	93404.87	187293.14								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	579932.00	614072.00								
7. Total Disbursements (from Line 31)	79025.00	113165.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	500907.00	500907.00								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

Federal Election Commission
 999 E street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	9995.96	14227.56
(i) Itemized (use Schedule A)	83408.91	173065.58
(ii) Unitemized	93404.87	187293.14
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	93404.87	187293.14
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	93404.87	187293.14
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	93404.87	187293.14

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	290.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	290.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	59500.00	76500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	250.00
29. Other Disbursements.....	19525.00	36125.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	79025.00	113165.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	79025.00	113165.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	93404.87	187293.14
34. Total Contribution Refunds (from Line 28(d))	0.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	93404.87	187043.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	290.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	290.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr John J Ewashko		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1023327416623
Mailing Address 22 Ross Court		Amount of Each Receipt this Period 114.70
City Loudonville State NY Zip Code 12211	FEC ID number of contributing federal political committee. C	
Name of Employer Eli Lilly and Company Occupation Mgr-Public Affairs	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 229.40	
		P/R Deduction (\$114.70 Monthly)

B. Full Name (Last, First, Middle Initial) Mr Derica W Rice		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1550150616623
Mailing Address 11065 Sedgemoor Circle		Amount of Each Receipt this Period 250.00
City Carmel State IN Zip Code 46032	FEC ID number of contributing federal political committee. C	
Name of Employer Eli Lilly and Company Occupation Sr Vice President/CFO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	
		P/R Deduction (\$250.00 Monthly)

C. Full Name (Last, First, Middle Initial) Bruce Artim		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1996131316623
Mailing Address P.O. Box 86 10810 Clermont Avenue		Amount of Each Receipt this Period 154.16
City Garrett Park State MD Zip Code 20896	FEC ID number of contributing federal political committee. C	
Name of Employer Eli Lilly and Company Occupation Dir-Federal Affairs	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 308.32	
		P/R Deduction (\$154.16 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	518.86
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms Melissa E Haggar		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5782 N. Delaware St.		Transaction ID: PR371874416623	
City Indianapolis	State IN	Zip Code 46220	Amount of Each Receipt this Period _____ 119.66
FEC ID number of contributing federal political committee. C _____			
Name of Employer Eli Lilly and Company	Occupation Mgr-Demand Real-Six Sigma Black Belt		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 239.32		P/R Deduction (\$119.66 Monthly)

Full Name (Last, First, Middle Initial) B. Mr John B Quirk		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1815 Horseback Trail		Transaction ID: PR371877116623	
City Vienna	State VA	Zip Code 22182	Amount of Each Receipt this Period _____ 176.04
FEC ID number of contributing federal political committee. C _____			
Name of Employer Eli Lilly and Company	Occupation Dir-State Government Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 352.08		P/R Deduction (\$176.04 Monthly)

Full Name (Last, First, Middle Initial) C. Mr Joseph B Kelley		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1817 Horseback Trail		Transaction ID: PR371907516623	
City Vienna	State VA	Zip Code 22182	Amount of Each Receipt this Period _____ 253.46
FEC ID number of contributing federal political committee. C _____			
Name of Employer Eli Lilly and Company	Occupation Vice President-State/Fed Govt Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 506.92		P/R Deduction (\$253.46 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 549.16
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Dr Richard A White		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR371907616623
Mailing Address 12630 Walrond Road		Amount of Each Receipt this Period 101.30
City State Zip Code Fishers IN 46037	FEC ID number of contributing federal political committee. C	P/R Deduction (\$101.30 Monthly)
Name of Employer Eli Lilly and Company Occupation	Aggregate Year-to-Date ▼ 202.60	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr Stuart F Easley		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR371980416623
Mailing Address 11599 Ringer Road		Amount of Each Receipt this Period 114.40
City State Zip Code Fortville IN 46040	FEC ID number of contributing federal political committee. C	P/R Deduction (\$114.40 Monthly)
Name of Employer Eli Lilly and Company Occupation Portfolio Manager	Aggregate Year-to-Date ▼ 228.80	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dr Frank M Deane		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR372019016623
Mailing Address 7345 North Washington Blvd.		Amount of Each Receipt this Period 250.00
City State Zip Code Indianapolis IN 46240	FEC ID number of contributing federal political committee. C	P/R Deduction (\$250.00 Monthly)
Name of Employer Eli Lilly and Company Occupation VP-Quality	Aggregate Year-to-Date ▼ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	465.70
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr Simon Nicolas Reade Harford		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 4851 Willow Ridge Court		Transaction ID: PR372033816623	
City Zionsville	State IN	Zip Code 46077	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation VP and Controller-Finance		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial) B. Mr Gino Santini		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address Lilly Corporate Center		Transaction ID: PR372049916623	
City Indianapolis	State IN	Zip Code 46285	Amount of Each Receipt this Period 244.60
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Sr VP-Corp Strategy & Policy		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 489.20		P/R Deduction (\$244.60 Monthly)

Full Name (Last, First, Middle Initial) C. Mr Curtis Mc Manus		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 14037 Sedona Drive		Transaction ID: PR372074316623	
City Carmel	State IN	Zip Code 46032	Amount of Each Receipt this Period 123.58
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Mgr-Alliance Management		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.16		P/R Deduction (\$123.58 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	618.18
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Dr Michael D Clayman		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR372085516623	
Mailing Address 20 Bayberry Lane		Amount of Each Receipt this Period 149.52	
City Gloucester	State MA	Zip Code 01930	P/R Deduction (\$149.52 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Vice President-LRL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 299.04		

Full Name (Last, First, Middle Initial) B. Mr Peter J Johnson		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR372116316623	
Mailing Address 16181 Stony Ridge Drive		Amount of Each Receipt this Period 208.50	
City Noblesville	State IN	Zip Code 46060	P/R Deduction (\$208.50 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Exec Dir-Corporate Strategy		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 417.00		

Full Name (Last, First, Middle Initial) C. Ms Sherry M Korczynski		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR372135416623	
Mailing Address 442 Pine Valley Drive		Amount of Each Receipt this Period 127.38	
City Bridgeville	State PA	Zip Code 15017	P/R Deduction (\$127.38 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Dir-Sales-Neuro Ohio/West Virginia Area		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 254.76		

SUBTOTAL of Receipts This Page (optional)	485.40
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr Vincent Paul Mihalik		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 6431 Bergeson Way		Transaction ID: PR372181716623	
City State Zip Code Indianapolis IN 46278	Amount of Each Receipt this Period _____ 128.76		
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation GBD Platform Leader-Diabetes & Endocri		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 257.52		P/R Deduction (\$128.76 Monthly)

Full Name (Last, First, Middle Initial) B. Dr James E Audia		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1 Stone Wall Lane		Transaction ID: PR372336916623	
City State Zip Code Zionsville IN 46077	Amount of Each Receipt this Period _____ 215.44		
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Distinguished Lilly Scholar		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 430.88		P/R Deduction (\$215.44 Monthly)

Full Name (Last, First, Middle Initial) C. Dr Andrew M Dahlem		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 9312 Timberline Drive		Transaction ID: PR372409516623	
City State Zip Code Indianapolis IN 46256	Amount of Each Receipt this Period _____ 293.84		
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation VP-LRL Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 587.68		P/R Deduction (\$293.84 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	_____ 638.04
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 33
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr Michael C Heim		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR372442616623
Mailing Address 4584 Chase Oak Court		Amount of Each Receipt this Period 250.00
City State Zip Code Zionsville IN 46077	FEC ID number of contributing federal political committee. C	P/R Deduction (\$250.00 Monthly)
Name of Employer Eli Lilly and Company	Occupation VP-Information Technology/CIO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr Newton Crenshaw		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR372601416623
Mailing Address 4560 South 975 East		Amount of Each Receipt this Period 315.22
City State Zip Code Zionsville IN 46077-9554	FEC ID number of contributing federal political committee. C	P/R Deduction (\$315.22 Monthly)
Name of Employer Eli Lilly and Company	Occupation VP-Communications/Public Relat	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 630.44	

Full Name (Last, First, Middle Initial) C. Mr Stephen F Fry		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR372626416623
Mailing Address Eli Lilly and Company Lilly Corp Center, DC 1852		Amount of Each Receipt this Period 133.24
City State Zip Code Indianapolis IN 46285	FEC ID number of contributing federal political committee. C	P/R Deduction (\$133.24 Monthly)
Name of Employer Eli Lilly and Company	Occupation Exec Dir-HR Line	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.48	

SUBTOTAL of Receipts This Page (optional) ▶	698.46
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr Gregory N Larkin

Mailing Address 704 North Park Avenue

City State Zip Code
Indianapolis IN 46202

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

Name of Employer Eli Lilly and Company Occupation Dir-Corporate Health Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.48

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR372791516623

Amount of Each Receipt this Period
105.24

P/R Deduction (\$105.24 Monthly)

B. Full Name (Last, First, Middle Initial)
Mr Patrick C James

Mailing Address 1241 E, 400 S

City State Zip Code
Lebanon IN 46052

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

Name of Employer Eli Lilly and Company Occupation Pres-Elanco Animal Health

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.40

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR372809116623

Amount of Each Receipt this Period
167.70

P/R Deduction (\$167.70 Monthly)

C. Full Name (Last, First, Middle Initial)
Mr Danny L Wood

Mailing Address 4049 Brockton Manor South Dr.

City State Zip Code
Greenwood IN 46143

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

Name of Employer Eli Lilly and Company Occupation Patent Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.32

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR372831016623

Amount of Each Receipt this Period
109.16

P/R Deduction (\$109.16 Monthly)

SUBTOTAL of Receipts This Page (optional)	382.10
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mrs Priscilla M Gerde		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address Lakehurst		Transaction ID: PR372910816623	
City State Zip Code Battle Ground IN 47920	Amount of Each Receipt this Period _____ 118.60		
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Mgr-Corporate Health Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 237.20		
		P/R Deduction (\$118.60 Monthly)	

Full Name (Last, First, Middle Initial) B. Mrs Cheryl Dawn Neal		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 4909 Fall Creek Road		Transaction ID: PR372921616623	
City State Zip Code Indianapolis IN 46220	Amount of Each Receipt this Period _____ 181.56		
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Chief Operating Office-Corp Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 363.12		
		P/R Deduction (\$181.56 Monthly)	

Full Name (Last, First, Middle Initial) C. Ms Elizabeth G O'Farrell		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1106 E. 82nd Street		Transaction ID: PR372946016623	
City State Zip Code Indianapolis IN 46240	Amount of Each Receipt this Period _____ 115.38		
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Exec Dir & CFO-Lilly USA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 230.76		
		P/R Deduction (\$115.38 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 415.54
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr Stephen C Gillman		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR373146716623
Mailing Address 8735 Bergeson Drive		Amount of Each Receipt this Period 176.04
City Indianapolis State IN Zip Code 46278	FEC ID number of contributing federal political committee. C	P/R Deduction (\$176.04 Monthly)
Name of Employer Eli Lilly and Company Occupation Exec Dir-Global Process/Maint Engr	Aggregate Year-to-Date 352.08	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Mr Robert A Luginbill		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR373239516623
Mailing Address 12047 Sail Place Drive		Amount of Each Receipt this Period 138.80
City Indianapolis State IN Zip Code 46256	FEC ID number of contributing federal political committee. C	P/R Deduction (\$138.80 Monthly)
Name of Employer Eli Lilly and Company Occupation VP- Mfg Strategy / Planning	Aggregate Year-to-Date 277.60	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Mr Sidney Taurel		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR373260616623
Mailing Address Lilly Corporate Center		Amount of Each Receipt this Period 416.00
City Indianapolis State IN Zip Code 46285	FEC ID number of contributing federal political committee. C	P/R Deduction (\$416.00 Monthly)
Name of Employer Eli Lilly and Company Occupation President/COO	Aggregate Year-to-Date 832.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	730.84
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr David P Lewis		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR373450916623
Mailing Address 9029 Diamond Pointe Drive		Amount of Each Receipt this Period 135.66
City Indianapolis State IN Zip Code 46236	FEC ID number of contributing federal political committee. C	P/R Deduction (\$135.66 Monthly)
Name of Employer Eli Lilly and Company Occupation Exec Dir-Corporate Taxes	Aggregate Year-to-Date 271.32	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

B. Full Name (Last, First, Middle Initial) Ms Elizabeth H Klimes		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR373754116623
Mailing Address 5843 Circle T Drive		Amount of Each Receipt this Period 250.00
City Greenwood State IN Zip Code 46143	FEC ID number of contributing federal political committee. C	P/R Deduction (\$250.00 Monthly)
Name of Employer Eli Lilly and Company Occupation VP-Six Sigma	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

C. Full Name (Last, First, Middle Initial) Dr John R Hayes		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR373951916623
Mailing Address 1947 Camargue Drive		Amount of Each Receipt this Period 141.76
City Zionsville State IN Zip Code 46077	FEC ID number of contributing federal political committee. C	P/R Deduction (\$141.76 Monthly)
Name of Employer Eli Lilly and Company Occupation VP-LRL/GBD Platform Leader-Neuroscienc	Aggregate Year-to-Date 283.52	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	527.42
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms Molly A Bodenschatz		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 608 Ridgewood Court		Transaction ID: PR374111116623	
City State Zip Code Ann Arbor MI 48103	Amount of Each Receipt this Period _____ 102.20		
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Sr Acct Exec-Michigan Public Payer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 204.40		P/R Deduction (\$102.20 Monthly)

Full Name (Last, First, Middle Initial) B. Dr Timothy R Franson		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 65 Clifden Pond Road		Transaction ID: PR374131116623	
City State Zip Code Zionsville IN 46077-8370	Amount of Each Receipt this Period _____ 100.44		
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation VP-Global Regulatory Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 200.88		P/R Deduction (\$100.44 Monthly)

Full Name (Last, First, Middle Initial) C. Dr Steven M Paul		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 1145 Laurelwood		Transaction ID: PR374155316623	
City State Zip Code Carmel IN 46032	Amount of Each Receipt this Period _____ 192.08		
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Exec VP-Science/Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 384.16		P/R Deduction (\$192.08 Monthly)

SUBTOTAL of Receipts This Page (optional)	_____ 394.72
TOTAL This Period (last page this line number only)	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 33
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr Aaron L Schacht		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR374184116623
Mailing Address 9699 Winter Way		Amount of Each Receipt this Period 176.66
City State Zip Code Zionsville IN 46077-0000	FEC ID number of contributing federal political committee. C	P/R Deduction (\$176.66 Monthly)
Name of Employer Eli Lilly and Company	Occupation Exec Dir-LRL Strat/Dec Sci/Proj Mgmt E	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 353.32	

Full Name (Last, First, Middle Initial) B. Mr Stephen H Jenison		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR374212216623
Mailing Address 10520 Shelborne Road		Amount of Each Receipt this Period 101.54
City State Zip Code Carmel IN 46032	FEC ID number of contributing federal political committee. C	P/R Deduction (\$101.54 Monthly)
Name of Employer Eli Lilly and Company	Occupation Information Officer-Manufacturing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.08	

Full Name (Last, First, Middle Initial) C. Ms Jamie JoAnne Oldani		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR374281016623
Mailing Address 630 N. State Street # 1902		Amount of Each Receipt this Period 101.34
City State Zip Code Chicago IL 60610	FEC ID number of contributing federal political committee. C	P/R Deduction (\$101.34 Monthly)
Name of Employer Eli Lilly and Company	Occupation Mgr-Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.68	

SUBTOTAL of Receipts This Page (optional) ▶	379.54
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr Robert Allen Armitage		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR374312716623
Mailing Address Lilly Corporate Center		Amount of Each Receipt this Period 416.00
City Indianapolis	State IN	Zip Code 46285
FEC ID number of contributing federal political committee. C		P/R Deduction (\$416.00 Monthly)
Name of Employer Eli Lilly and Company	Occupation Chairman of the Board/CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 832.00	

Full Name (Last, First, Middle Initial) B. Dr Thomas F Bumol		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR374359016623
Mailing Address 6543 Cotton Creek Court		Amount of Each Receipt this Period 133.36
City Indianapolis	State IN	Zip Code 46278
FEC ID number of contributing federal political committee. C		P/R Deduction (\$133.36 Monthly)
Name of Employer Eli Lilly and Company	Occupation VP-Biotech Disc Res/Applied Molecular	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.72	

Full Name (Last, First, Middle Initial) C. Mr William S Reid		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR374405116623
Mailing Address 9614 Hill Creek Drive		Amount of Each Receipt this Period 122.48
City Verona	State WI	Zip Code 53593
FEC ID number of contributing federal political committee. C		P/R Deduction (\$122.48 Monthly)
Name of Employer Eli Lilly and Company	Occupation Mgr-Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 244.96	

SUBTOTAL of Receipts This Page (optional) ▶	671.84
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr John C Lechleiter

Mailing Address Lilly Corporate Center

City Indianapolis State IN Zip Code 46285

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

Name of Employer Eli Lilly and Company Occupation President/COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 832.00

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR374440616623

Amount of Each Receipt this Period
416.00

P/R Deduction (\$416.00 Monthly)

B. Full Name (Last, First, Middle Initial)
Dr Charles M Beasley

Mailing Address 8161 Beech Knoll

City Indianapolis State IN Zip Code 46256-2107

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

Name of Employer Eli Lilly and Company Occupation Distinguished Lilly Scholar

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 261.80

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR374479116623

Amount of Each Receipt this Period
130.90

P/R Deduction (\$130.90 Monthly)

C. Full Name (Last, First, Middle Initial)
Mr Jon D Barganier

Mailing Address 8112 Henslow Court

City Montgomery State AL Zip Code 36117

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

Name of Employer Eli Lilly and Company Occupation Mgr-Public Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.80

Date of Receipt
M M / D D / Y Y Y Y Y

Transaction ID: PR374529816623

Amount of Each Receipt this Period
127.90

P/R Deduction (\$127.90 Monthly)

SUBTOTAL of Receipts This Page (optional) ► **674.80**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr John A Payne		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR374595716623	
Mailing Address 3626 Providence Manor Road		Amount of Each Receipt this Period 117.26	
City Charlotte	State NC	Zip Code 28270	P/R Deduction (\$117.26 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 234.52	
Name of Employer Eli Lilly and Company	Occupation DistMgr-Neuro Charlotte West Ofc		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

B. Full Name (Last, First, Middle Initial) Ms Anne Nobles		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR374613116623	
Mailing Address 8801 Worthington Court		Amount of Each Receipt this Period 158.54	
City Indianapolis	State IN	Zip Code 46278	P/R Deduction (\$158.54 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 317.08	
Name of Employer Eli Lilly and Company	Occupation VP-Corporate Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

C. Full Name (Last, First, Middle Initial) Mr Nathaniel R Miles		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR374703416623	
Mailing Address 4552 130th Place S.E.		Amount of Each Receipt this Period 140.74	
City Bellevue	State WA	Zip Code 98006	P/R Deduction (\$140.74 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 281.48	
Name of Employer Eli Lilly and Company	Occupation Dir-State Government Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	416.54
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr Francis M Fitzgerald		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 1400 Trotters Lane		Transaction ID: PR374987516623	
City Williamston	State MI	Zip Code 48895	Amount of Each Receipt this Period 128.70
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Mgr-Public Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.40		P/R Deduction (\$128.70 Monthly)

Full Name (Last, First, Middle Initial) B. Mr Christopher E Beal		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 5745 Carrollton Avenue		Transaction ID: PR375030716623	
City Indianapolis	State IN	Zip Code 46220	Amount of Each Receipt this Period 132.48
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Dir-Globl Corp Affairs-Alliance Mgmt-T		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 264.96		P/R Deduction (\$132.48 Monthly)

Full Name (Last, First, Middle Initial) C. Mr Daniel J Wahby		Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address 385 Royal Tern Road South		Transaction ID: PR375031216623	
City Ponte Vedra Beach	State FL	Zip Code 32082-6209	Amount of Each Receipt this Period 171.76
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Dir-State Govt Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 343.52		P/R Deduction (\$171.76 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	432.94
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr John E Bonitt		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR375033516623	
Mailing Address 1200 Villamay Boulevard		Amount of Each Receipt this Period 209.20	
City Alexandria	State VA	Zip Code 22307	P/R Deduction (\$209.20 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Exec Dir - Federal Government Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 418.40		

Full Name (Last, First, Middle Initial) B. Dr Douglas K Kelsey		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR375084316623	
Mailing Address 4906 Willow Ridge Court		Amount of Each Receipt this Period 183.06	
City Zionsville	State IN	Zip Code 46077	P/R Deduction (\$183.06 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Medical Fellow I		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 366.12		

Full Name (Last, First, Middle Initial) C. Daniel M. Howle		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR685560116623	
Mailing Address 3324 Chenu Avenue		Amount of Each Receipt this Period 129.86	
City Sacramento	State CA	Zip Code 95821	P/R Deduction (\$129.86 Monthly)
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Mgr-Public Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 259.72		

SUBTOTAL of Receipts This Page (optional) ▶	522.12
TOTAL This Period (last page this line number only) ▶	9995.96

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Committee To Re-Elect Artur Davis To Congress		Transaction ID: 25501254 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 7
Mailing Address PO Box 1845		Amount of Each Disbursement this Period 1000.00 Contribution
City Birmingham State AL Zip Code 35201	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Artur Davis		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 7	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. The Fund For A Greater America		Transaction ID: 25479053 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 499 S. Capitol St., SW #414		Amount of Each Disbursement this Period 5000.00 Contribution
City Washington State DC Zip Code 20003	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. National Republican Senatorial Committee		Transaction ID: 25502893 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 7
Mailing Address 425 Second Street, NE		Amount of Each Disbursement this Period 15000.00 Contribution
City Washington State DC Zip Code 20002	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	21000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. The Committee for the Preservation of Capitalism		Transaction ID: 25502868 Date of Disbursement
Mailing Address P.O. Box 65314		<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City Washington	State DC	Zip Code 20036
Purpose of Disbursement Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name	Amount of Each Disbursement this Period <input type="text" value="5000.00"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Contribution	

Full Name (Last, First, Middle Initial) B. First State PAC		Transaction ID: 25442717 Date of Disbursement
Mailing Address P.O. Box 3006		<input type="text" value="02"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City Wilmington	State DE	Zip Code 19804
Purpose of Disbursement Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name	Amount of Each Disbursement this Period <input type="text" value="5000.00"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Contribution	

Full Name (Last, First, Middle Initial) C. Coleman For Senate 08		Transaction ID: 25480952 Date of Disbursement
Mailing Address 7300 Hudson Blvd, Suite 270A		<input type="text" value="02"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City St Paul	State MN	Zip Code 55128
Purpose of Disbursement Contribution	<input type="text" value="011"/> Category/ Type	
Candidate Name Sen. Norm Coleman	Amount of Each Disbursement this Period <input type="text" value="5000.00"/>	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 2	Contribution	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="15000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Coleman For Senate 08		Transaction ID: 25484123 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 7300 Hudson Blvd, Suite 270A		Amount of Each Disbursement this Period 2500.00 Contribution
City St Paul State MN Zip Code 55128	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Sen. Norm Coleman		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Team Sununu		Transaction ID: 25480710 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address PO Box 500		Amount of Each Disbursement this Period 5000.00 Contribution
City Rye State NH Zip Code 03870	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name John Sununu		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 4	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Team Sununu		Transaction ID: 25480810 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address PO Box 500		Amount of Each Disbursement this Period 2500.00 Contribution
City Rye State NH Zip Code 03870	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name John Sununu		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 4	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. White Mountain PAC		Transaction ID: 25502877 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 7
Mailing Address P.O. Box 1772		Amount of Each Disbursement this Period 5000.00
City Concord State NH Zip Code 03302	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Stephanie Tubbs Jones For Us Congress		Transaction ID: 25501255 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 7
Mailing Address 3729 Silsby Rd		Amount of Each Disbursement this Period 1000.00
City University Heights State OH Zip Code 44118	Contribution	
Purpose of Disbursement Contribution Candidate Name Rep. Stephanie Jones		011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 11		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. BLUE DOG PAC		Transaction ID: 25442711 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7
Mailing Address 6849 Old Dominion Drive Suite 222		Amount of Each Disbursement this Period 2500.00
City Mclean State VA Zip Code 22101	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	8500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Next Century Fund		Transaction ID: 25502890 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 7	
Mailing Address 116 South Royal Street		Amount of Each Disbursement this Period 5000.00	
City Alexandria State VA Zip Code 22314	Purpose of Disbursement Contribution	Category/ Type 011	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Contribution		

SUBTOTAL of Disbursements This Page (optional)	▶	5000.00
TOTAL This Period (last page this line number only)	▶	59500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. JAMES THOMAS CAMPAIGN		Transaction ID: 25483897 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 2713 HIGHWAY 14 EAST		Amount of Each Disbursement this Period 500.00
City SELMA State AL Zip Code 36703	Purpose of Disbursement Debt Retirement Category/Type 011	
Candidate Name JAMES THOMAS		Debt Retirement
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 69	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lowell Barron Campaign		Transaction ID: 25483896 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address PO Box 65		Amount of Each Disbursement this Period 1000.00
City Fyffe State AL Zip Code 35971	Purpose of Disbursement Debt Retirement Category/Type 011	
Candidate Name Lowell Barron		Debt Retirement
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Randy Wood		Transaction ID: 25483910 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 0 7
Mailing Address 618 Winfrey Lane		Amount of Each Disbursement this Period 250.00
City Anniston State AL Zip Code 36206	Purpose of Disbursement Debt Retirement Category/Type 011	
Candidate Name AL Rep. Randy Wood		Debt Retirement
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 36	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1750.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Friends of Saviano		Transaction ID: 25475776 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 7
Mailing Address 7730 W. Belden Avenue		Amount of Each Disbursement this Period 2500.00
City Elmwood Park State IL Zip Code 60707	Category/ Type 011	
Purpose of Disbursement Angelo Saviano, STATE HOUSE 77th IL		Angelo Saviano, STATE HOUSE 77th IL
Candidate Name Angelo Saviano		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 77		

Full Name (Last, First, Middle Initial) B. House Republican Campaign Committee		Transaction ID: 25442890 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7
Mailing Address PO Box 11787		Amount of Each Disbursement this Period 500.00
City Harrisburg State PA Zip Code 17108	Category/ Type 011	
Purpose of Disbursement Contribution		Contribution
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Senate Republican Campaign Committee		Transaction ID: 25442888 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7
Mailing Address PO Box 792		Amount of Each Disbursement this Period 2500.00
City Harrisburg State PA Zip Code 17108	Category/ Type 011	
Purpose of Disbursement Contribution		Contribution
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	5500.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Keystone Leadership PAC		Transaction ID: 25442886 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7
Mailing Address PO Box 506		Amount of Each Disbursement this Period 1000.00
City Harrisburg State PA Zip Code 17108-0000	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Joe Scarnati		Transaction ID: 25501256 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 7
Mailing Address PO Box 177		Amount of Each Disbursement this Period 1000.00
City Harrisburg State PA Zip Code 15824	Joe Scarnati, STATE SENATE PA	
Purpose of Disbursement Joe Scarnati, STATE SENATE PA Candidate Name Joe Scarnati		011 Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 25	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Dominic Pileggi		Transaction ID: 25501257 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 7
Mailing Address 101 W. Baltimore Avenue, 2nd Floor		Amount of Each Disbursement this Period 2000.00
City Media State PA Zip Code 19063	Dominic Pileggi, STATE SENATE PA	
Purpose of Disbursement Dominic Pileggi, STATE SENATE PA Candidate Name PA Sen. Dominic Pileggi		011 Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 9	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. South Carolina Senate Democratic Caucus		Transaction ID: 25442883 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7
Mailing Address PO Box 11484		Amount of Each Disbursement this Period 3500.00
City Columbia State SC Zip Code 29211	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. South Carolina Senate Republican Caucus		Transaction ID: 25442722 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7
Mailing Address PO Box 12012		Amount of Each Disbursement this Period 3500.00
City Columbia State SC Zip Code 29211	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ritchie for Senate		Transaction ID: 25442889 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7
Mailing Address P.O. Box 18142		Amount of Each Disbursement this Period 1000.00
City Spartanburg State SC Zip Code 29318	Contribution	
Purpose of Disbursement Contribution Candidate Name Senator James Ritchie, Jr.		011 Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 13	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	8000.00
TOTAL This Period (last page this line number only) ▶	19250.00