

# 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 2008 through 02 29 2008

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 10 2008

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

Office Use Only									
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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	8

 To: 

M	M
0	2

D	D
2	9

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		638758.62
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	706510.20									
(c) Total Receipts (from Line 19) .....	93673.94	189554.52								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	800184.14	828313.14								
7. Total Disbursements (from Line 31) .....	103568.14	131697.14								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	696616.00	696616.00								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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	8

 To: 

M	M
0	2

D	D
2	9

Y	Y	Y	Y
2	0	0	8

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	11719.56	17116.76
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	81954.38	171437.76
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	93673.94	188554.52
(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) .....	93673.94	188554.52
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	1000.00
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)) .....	93673.94	189554.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	93673.94	189554.52

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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	250.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	250.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	78500.00	94000.00
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 .....	118.14	592.14
(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)) .....	118.14	592.14
29. Other Disbursements.....	24950.00	36855.00
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))..	103568.14	131697.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	103568.14	131697.14

**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) .....	93673.94	188554.52
34. Total Contribution Refunds (from Line 28(d)) .....	118.14	592.14
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	93555.80	187962.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	250.00
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	250.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 40  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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

Mailing Address 22 Ross Court

City Loudonville State NY Zip Code 12211-2021

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 ▼ 238.60

Date of Receipt  /  /

**Transaction ID:** PR1023327418845

Amount of Each Receipt this Period 119.30

P/R Deduction (\$119.30 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mr Todd A Bledsoe

Mailing Address 2233 Lovell Court

City Lexington State KY Zip Code 40513-1943

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 ▼ 210.56

Date of Receipt  /  /

**Transaction ID:** PR1026432418845

Amount of Each Receipt this Period 105.28

P/R Deduction (\$105.28 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Mr Derica W Rice

Mailing Address Eli Lilly and Company Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Sr Vice President/CFO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  /  /

**Transaction ID:** PR1550150618845

Amount of Each Receipt this Period 250.00

P/R Deduction (\$250.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **474.58**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Jacques Tapiero	Date of Receipt
	Mailing Address 10530 Hyde Park	<input type="text"/> / <input type="text"/> / <input type="text"/>
	City State Zip Code Carmel IN 46032-8300	<b>Transaction ID:</b> PR1736838818845
	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 104.98
	Name of Employer Eli Lilly and Company Occupation President-Intercontinental Operns Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 209.96	P/R Deduction (\$104.98 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Bruce Artim	Date of Receipt
	Mailing Address P.O. Box 86 10810 Clermont Avenue	<input type="text"/> / <input type="text"/> / <input type="text"/>
	City State Zip Code Garrett Park MD 20896-0086	<b>Transaction ID:</b> PR1996131318845
	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 159.88
	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 ▼ 319.76	P/R Deduction (\$159.88 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Alex M Azar	Date of Receipt
	Mailing Address 7430 North Washington Boulevard	<input type="text"/> / <input type="text"/> / <input type="text"/>
	City State Zip Code Indianapolis IN 46240-3090	<b>Transaction ID:</b> PR2203182818845
	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 416.00
	Name of Employer Eli Lilly and Company Occupation Sr VP-Corporate Affairs/Communications Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 832.00	P/R Deduction (\$416.00 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>680.86</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr John B Quirk		Date of Receipt M M / D D / Y Y Y Y Y		
	Mailing Address 1815 Horseback Trail		Transaction ID: PR371877118845		
	City Vienna	State VA	Zip Code 22182-1813	Amount of Each Receipt this Period 182.04	
	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 ▼ 364.08			P/R Deduction (\$182.04 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Joseph B Kelley		Date of Receipt M M / D D / Y Y Y Y Y		
	Mailing Address Eli Lilly and Company Lilly Corporate Center		Transaction ID: PR371907518845		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 266.14	
	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 ▼ 532.28			P/R Deduction (\$266.14 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Stuart F Easley		Date of Receipt M M / D D / Y Y Y Y Y		
	Mailing Address Eli Lilly and Company Lilly Corporate Center		Transaction ID: PR371980418845		
	City Indianapolis	State IN	Zip Code 46285-0001	Amount of Each Receipt this Period 119.56	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Eli Lilly and Company		Occupation Mgr-Apollo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 239.12			P/R Deduction (\$119.56 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	567.74
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Dr Frank M Deane	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 7345 North Washington Blvd.	<b>Transaction ID:</b> PR372019018845
	City Indianapolis State IN Zip Code 46240-3087	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$250.00 Monthly)
	Name of Employer Eli Lilly and Company Occupation President-Manufacturing Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Stanley J Bialkowski	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 6016 Drumquin Drive	<b>Transaction ID:</b> PR372031118845
	City Raleigh State NC Zip Code 27614-7163	Amount of Each Receipt this Period 113.58
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$113.58 Monthly)
	Name of Employer Eli Lilly and Company Occupation Dis Mgr-Neuro Raleigh East Ofc	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 227.16		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Simon Nicolas Reade Harford	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 4851 Willow Ridge Court	<b>Transaction ID:</b> PR372033818845
	City Zionsville State IN Zip Code 46077-9487	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$250.00 Monthly)
	Name of Employer Eli Lilly and Company Occupation VP/Controller-Finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>613.58</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 40  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr Gino Santini</p> <p>Mailing Address 13585 Brentwood Lane</p> <p>City State Zip Code Carmel IN 46033-9607</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Eli Lilly and Company      Occupation: Sr VP-Corp Strategy &amp; Bus Development</p> <p>Receipt For: <input type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">503.92</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span></p> <p><b>Transaction ID:</b> PR372049918845</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">251.96</span></p> <p>P/R Deduction (\$251.96 Monthly)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr Thomas W Grein</p> <p>Mailing Address 5402 North Meridian Street</p> <p>City State Zip Code Indianapolis IN 46208-2656</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Eli Lilly and Company      Occupation: VP/Treasurer-Finance</p> <p>Receipt For: <input type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">407.32</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span></p> <p><b>Transaction ID:</b> PR372069218845</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">203.66</span></p> <p>P/R Deduction (\$203.66 Monthly)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Mr Curtis Mc Manus</p> <p>Mailing Address 14037 Sedona Drive</p> <p>City State Zip Code Carmel IN 46032-8360</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer: Eli Lilly and Company      Occupation: Mgr-Alliance Management</p> <p>Receipt For: <input type="checkbox"/> Primary   <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">255.20</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</span></p> <p><b>Transaction ID:</b> PR372074318845</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">127.60</span></p> <p>P/R Deduction (\$127.60 Monthly)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">583.22</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 40  
(check only one)

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr Peter J Johnson

Mailing Address 16181 Stony Ridge Drive

City Noblesville State IN Zip Code 46060-8769

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

Name of Employer Eli Lilly and Company Occupation Exec Dir-Corporate Strategy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 437.88

Date of Receipt [M M] / [D D] / [Y Y Y Y Y]

**Transaction ID:** PR372116318845

Amount of Each Receipt this Period 218.94

P/R Deduction (\$218.94 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr Grady Grant

Mailing Address 5263 Comanche Trail

City Carmel State IN Zip Code 46033-8852

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

Name of Employer Eli Lilly and Company Occupation Exec Sales Director-Neuro West Region

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.60

Date of Receipt [M M] / [D D] / [Y Y Y Y Y]

**Transaction ID:** PR372171018845

Amount of Each Receipt this Period 101.30

P/R Deduction (\$101.30 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr Vincent Paul Mihalik

Mailing Address 6431 Bergeson Way

City Indianapolis State IN Zip Code 46278-2211

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

Name of Employer Eli Lilly and Company Occupation GBD Platform Leader-Diabetes & Endocri

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 267.80

Date of Receipt [M M] / [D D] / [Y Y Y Y Y]

**Transaction ID:** PR372181718845

Amount of Each Receipt this Period 133.90

P/R Deduction (\$133.90 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **454.14**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 40  
(check only one)

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

**A.**

Full Name (Last, First, Middle Initial)  
Dr James E Audia

Mailing Address Eli Lilly and Company  
Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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 ▼ 456.72

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

**Transaction ID:** PR372336918845

Amount of Each Receipt this Period 228.36

P/R Deduction (\$228.36 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Dr Andrew M Dahlem

Mailing Address 9312 Timberline Drive

City Indianapolis State IN Zip Code 46256-4721

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

Name of Employer Eli Lilly and Company Occupation VP / COO LRL - LRL Europe

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 628.80

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

**Transaction ID:** PR372409518845

Amount of Each Receipt this Period 314.40

P/R Deduction (\$314.40 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr Michael C Heim

Mailing Address 4584 Chase Oak Court

City Zionsville State IN Zip Code 46077-9652

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

Name of Employer Eli Lilly and Company Occupation VP-Information Technology/CIO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

**Transaction ID:** PR372442618845

Amount of Each Receipt this Period 250.00

P/R Deduction (\$250.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **792.76**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Dr James Michael McGill	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1365 North Claridge Way	<b>Transaction ID:</b> PR372449518845
	City State Zip Code Carmel IN 46032-8331	Amount of Each Receipt this Period 104.00
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$104.00 Monthly)
Name of Employer Eli Lilly and Company	Occupation Medical Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Newton Crenshaw	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 4560 South 975 East	<b>Transaction ID:</b> PR372601418845
	City State Zip Code Zionsville IN 46077-9554	Amount of Each Receipt this Period 324.68
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$324.68 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 ▼ 649.36	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Patrick C James	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 1241 E, 400 S	<b>Transaction ID:</b> PR372809118845
	City State Zip Code Lebanon IN 46052-9762	Amount of Each Receipt this Period 174.40
	FEC ID number of contributing federal political committee. <b>C</b>	P/R Deduction (\$174.40 Monthly)
Name of Employer Eli Lilly and Company	Occupation Loaned Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 348.80	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>603.08</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Danny L Wood	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 9337 Deer Ridge Dr	<b>Transaction ID:</b> PR372831018845
	City State Zip Code Zionsville IN 46077-8655	Amount of Each Receipt this Period 115.18
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Eli Lilly and Company    Occupation Patent Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.36	P/R Deduction (\$115.18 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mrs Priscilla M Gerde	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address Lakehurst 8303 Tyler Road	<b>Transaction ID:</b> PR372910818845
	City State Zip Code Battle Ground IN 47920-9709	Amount of Each Receipt this Period 124.54
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Eli Lilly and Company    Occupation Mgr-Employee Health Plan Admin Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 249.08	P/R Deduction (\$124.54 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mrs Cheryl Dawn Neal	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 4909 Fall Creek Road	<b>Transaction ID:</b> PR372921618845
	City State Zip Code Indianapolis IN 46220-5374	Amount of Each Receipt this Period 185.20
	FEC ID number of contributing federal political committee. <b>C</b>	
	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 ▼ 370.40	P/R Deduction (\$185.20 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>424.92</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 15 / 40  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Ms Elizabeth G O'Farrell

Mailing Address 1106 E. 82nd Street

City State Zip Code  
Indianapolis IN 46240-2388

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

Name of Employer Eli Lilly and Company      Occupation Exec Dir & CFO-Lilly USA

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      244.60

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

**Transaction ID:** PR372946018845

Amount of Each Receipt this Period  
122.30

P/R Deduction (\$122.30 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mr James W Price

Mailing Address 12982 Thurmond Way

City State Zip Code  
Westfield IN 46074-8430

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:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      206.84

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

**Transaction ID:** PR373054318845

Amount of Each Receipt this Period  
103.42

P/R Deduction (\$103.42 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Mr Stephen C Gillman

Mailing Address 8735 Bergeson Drive

City State Zip Code  
Indianapolis IN 46278-1192

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

Name of Employer Eli Lilly and Company      Occupation Exec Dir-Environmental Health/Safety

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      369.68

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

**Transaction ID:** PR373146718845

Amount of Each Receipt this Period  
184.84

P/R Deduction (\$184.84 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **410.56**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 40  
(check only one)

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr Robert A Luginbill

Mailing Address 12047 Sail Place Drive

City Indianapolis State IN Zip Code 46256-9441

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

Name of Employer Eli Lilly and Company Occupation VP-Mfg Strategy/Planning

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 291.48

Date of Receipt [M M] / [D D] / [Y Y Y Y Y]

**Transaction ID:** PR373239518845

Amount of Each Receipt this Period 145.74

P/R Deduction (\$145.74 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr Sidney Taurel

Mailing Address Eli Lilly and Company Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Chairman of the Board/CEO

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:** PR373260618845

Amount of Each Receipt this Period 416.00

P/R Deduction (\$416.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr David P Lewis

Mailing Address 9029 Diamond Pointe Drive

City Indianapolis State IN Zip Code 46236-9052

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

Name of Employer Eli Lilly and Company Occupation Exec Dir-Corporate Taxes

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 281.32

Date of Receipt [M M] / [D D] / [Y Y Y Y Y]

**Transaction ID:** PR373450918845

Amount of Each Receipt this Period 140.66

P/R Deduction (\$140.66 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **702.40**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms Elizabeth H Klimes		Date of Receipt
	Mailing Address 5843 Circle T Drive		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Greenwood	IN	46143-8841
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer Eli Lilly and Company		Occupation VP-Six Sigma	<b>Transaction ID:</b> PR373754118845
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 500.00	Amount of Each Receipt this Period <input type="text"/> 250.00
			P/R Deduction (\$250.00 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Thomas W Wallace		Date of Receipt
	Mailing Address 1181 Broad Creek Place		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Herndon	VA	20170-2485
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer Eli Lilly and Company		Occupation Dir-US Advocacy	<b>Transaction ID:</b> PR373873218845
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 312.24	Amount of Each Receipt this Period <input type="text"/> 156.12
			P/R Deduction (\$156.12 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Douglas J Opel		Date of Receipt
	Mailing Address 421 W. Hickory Ridge Circle		<input type="text"/> / <input type="text"/> / <input type="text"/>
	City	State	Zip Code
	Argyle	TX	76226-3946
	FEC ID number of contributing federal political committee.		<b>C</b> <input type="text"/>
Name of Employer Eli Lilly and Company		Occupation Dir-Sales-Neuro Southern California Ar	<b>Transaction ID:</b> PR373881518845
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 304.48	Amount of Each Receipt this Period <input type="text"/> 152.24
			P/R Deduction (\$152.24 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>558.36</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 40  
(check only one)

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

**A.**

Full Name (Last, First, Middle Initial)  
Dr John R Hayes

Mailing Address 1947 Camargue Drive

City State Zip Code  
Zionsville IN 46077-9054

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

Name of Employer Eli Lilly and Company Occupation VP-LRL/GBD Platform Leader-Neuroscience

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 294.84

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Transaction ID: PR373951918845

Amount of Each Receipt this Period 147.42

P/R Deduction (\$147.42 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr DAVID Thomas NOESGES

Mailing Address 5903 William Conner Way

City State Zip Code  
Carmel IN 46033-8826

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

Name of Employer Eli Lilly and Company Occupation National Sales Dir-US Diabetes

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.32

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Transaction ID: PR374108718845

Amount of Each Receipt this Period 102.16

P/R Deduction (\$102.16 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Ms Molly A Bodenschatz

Mailing Address 608 Ridgewood Court

City State Zip Code  
Ann Arbor MI 48103-6516

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:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.76

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Transaction ID: PR374111118845

Amount of Each Receipt this Period 110.38

P/R Deduction (\$110.38 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **359.96**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 40

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial)  
Dr Timothy R Franson

Mailing Address Eli Lilly and Company  
Lilly Corporate Center

City Indianapolis State IN Zip Code 46285-0001

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

Name of Employer Eli Lilly and Company Occupation VP-Global Regulatory Affairs

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.92

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

Transaction ID: PR37413118845

Amount of Each Receipt this Period  
105.46

P/R Deduction (\$105.46 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr Philip L Johnson

Mailing Address 1867 Blore Heath

City Carmel State IN Zip Code 46032-7214

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

Name of Employer Eli Lilly and Company Occupation Exec Dir-Investor Relations

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.08

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

Transaction ID: PR374142418845

Amount of Each Receipt this Period  
100.04

P/R Deduction (\$100.04 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Dr Steven M Paul

Mailing Address 1145 Laurelwood

City Carmel State IN Zip Code 46032-8751

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

Name of Employer Eli Lilly and Company Occupation Exec VP-Science/Technology

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 403.32

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

Transaction ID: PR374155318845

Amount of Each Receipt this Period  
201.66

P/R Deduction (\$201.66 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

407.16

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 40
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr Michael J Harrington	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 235 Royal Oak Court	<b>Transaction ID:</b> PR374178618845
	City State Zip Code Zionsville IN 46077-1039	Amount of Each Receipt this Period 112.08
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: Eli Lilly and Company Occupation: Deputy General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 224.16	P/R Deduction (\$112.08 Monthly)

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr Aaron L Schacht	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 9699 Winter Way	<b>Transaction ID:</b> PR374184118845
	City State Zip Code Zionsville IN 46077-8241	Amount of Each Receipt this Period 185.50
	FEC ID number of contributing federal political committee. <b>C</b>	
	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 ▼ 371.00	P/R Deduction (\$185.50 Monthly)

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr Stephen H Jenison	Date of Receipt M M / D D / Y Y Y Y Y
	Mailing Address 10520 Shelborne Road	<b>Transaction ID:</b> PR374212218845
	City State Zip Code Carmel IN 46032-9569	Amount of Each Receipt this Period 106.62
	FEC ID number of contributing federal political committee. <b>C</b>	
	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 ▼ 213.24	P/R Deduction (\$106.62 Monthly)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>404.20</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 40  
(check only one)

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

**A.** Full Name (Last, First, Middle Initial)  
Ms Jamie JoAnne Oldani

Mailing Address 630 N. State Street  
# 1902

City Chicago State IL Zip Code 60610-3954

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 ▼ 210.80

Date of Receipt [M M] / [D D] / [Y Y Y Y Y]

**Transaction ID:** PR374281018845

Amount of Each Receipt this Period 105.40

P/R Deduction (\$105.40 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mr Robert Allen Armitage

Mailing Address 525 Lockerbie Circle N. Drive

City Indianapolis State IN Zip Code 46202

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

Name of Employer Eli Lilly and Company Occupation Sr VP-General Counsel

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:** PR374312718845

Amount of Each Receipt this Period 416.00

P/R Deduction (\$416.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Dr Thomas F Bumol

Mailing Address 6543 Cotton Creek Court

City Indianapolis State IN Zip Code 46278-2217

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

Name of Employer Eli Lilly and Company Occupation VP- Biotech Disc Res / Pres- AME

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 293.40

Date of Receipt [M M] / [D D] / [Y Y Y Y Y]

**Transaction ID:** PR374359018845

Amount of Each Receipt this Period 146.70

P/R Deduction (\$146.70 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **668.10**

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

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

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

FOR LINE NUMBER: PAGE 22 / 40  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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 William S Reid

Mailing Address 9614 Hill Creek Drive

City State Zip Code  
Verona WI 53593-7981

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

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

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      253.56

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

**Transaction ID:** PR374405118845

Amount of Each Receipt this Period  
126.78

P/R Deduction (\$126.78 Monthly)

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

Mailing Address Eli Lilly and Company  
Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company      Occupation President/COO

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      832.00

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

**Transaction ID:** PR374440618845

Amount of Each Receipt this Period  
416.00

P/R Deduction (\$416.00 Monthly)

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

Mailing Address 8161 Beech Knoll

City State Zip Code  
Indianapolis IN 46256-2107

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

Name of Employer Eli Lilly and Company      Occupation Distinguished Lilly Scholar

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      270.96

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

**Transaction ID:** PR374479118845

Amount of Each Receipt this Period  
135.48

P/R Deduction (\$135.48 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **678.26**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 40  
(check only one)

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

**A.**

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

Mailing Address 8112 Henslow Court

City State Zip Code  
Montgomery AL 36117-7479

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 ▼ 263.48

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

**Transaction ID:** PR374529818845

Amount of Each Receipt this Period 131.74

P/R Deduction (\$131.74 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr John A Payne

Mailing Address 3626 Providence Manor Road

City State Zip Code  
Charlotte NC 28270-3706

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

Name of Employer Eli Lilly and Company Occupation DistMgr-Neuro Charlotte West Ofc

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 243.92

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

**Transaction ID:** PR374595718845

Amount of Each Receipt this Period 121.96

P/R Deduction (\$121.96 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Ms Anne Nobles

Mailing Address 8801 Worthington Court

City State Zip Code  
Indianapolis IN 46278-1179

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

Name of Employer Eli Lilly and Company Occupation VP-Compliance & Enterprise Risk Mgmt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 333.56

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

**Transaction ID:** PR374613118845

Amount of Each Receipt this Period 166.78

P/R Deduction (\$166.78 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **420.48**

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

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

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

FOR LINE NUMBER: PAGE 24 / 40  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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 Nathaniel R Miles

Mailing Address 4552 130th Place S.E.

City State Zip Code  
Bellevue WA 98006-2051

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

Name of Employer Eli Lilly and Company      Occupation Dir-State Government Affairs

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      308.36

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

**Transaction ID:** PR374703418845

Amount of Each Receipt this Period  
154.18

P/R Deduction (\$154.18 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
Mr David C Swisher

Mailing Address 2808 Walden Drive

City State Zip Code  
Camas WA 98607-9143

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

Name of Employer Eli Lilly and Company      Occupation Mgr- NMCA- Kaiser/ Healthnet

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      262.84

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

**Transaction ID:** PR374720218845

Amount of Each Receipt this Period  
131.42

P/R Deduction (\$131.42 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
Dr Lisa A Shipley

Mailing Address 14575 Geist Ridge Drive

City State Zip Code  
Fortville IN 46040-9021

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

Name of Employer Eli Lilly and Company      Occupation VP-ADME

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      245.16

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

**Transaction ID:** PR374808918845

Amount of Each Receipt this Period  
122.58

P/R Deduction (\$122.58 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **408.18**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 40

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial)  
Ms Deirdre P Connelly

Mailing Address 519 East Vermont Street

City State Zip Code  
Indianapolis IN 46202-3637

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

Name of Employer Occupation  
Eli Lilly and Company President-US Operations

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 513.32

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

Transaction ID: PR374818918845

Amount of Each Receipt this Period  
256.66

P/R Deduction (\$256.66 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr Francis M Fitzgerald

Mailing Address 1400 Trotters Lane

City State Zip Code  
Williamston MI 48895-8720

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

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

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 267.68

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

Transaction ID: PR374987518845

Amount of Each Receipt this Period  
133.84

P/R Deduction (\$133.84 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Mr Christopher E Beal

Mailing Address 5745 Carrollton Avenue

City State Zip Code  
Indianapolis IN 46220-2640

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

Name of Employer Occupation  
Eli Lilly and Company Dir-Globl Corp Affairs-Alliance Mgmt-T

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 298.64

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

Transaction ID: PR375030718845

Amount of Each Receipt this Period  
149.32

P/R Deduction (\$149.32 Monthly)

**SUBTOTAL** of Receipts This Page (optional) .....

539.82

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 40  
(check only one)

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

**A.**

Full Name (Last, First, Middle Initial)  
Mr Daniel J Wahby

Mailing Address 385 Royal Tern Road South

City State Zip Code  
Ponte Vedra Beach FL 32082-6209

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

Name of Employer Eli Lilly and Company Occupation Dir-State Govt Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 358.96

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

**Transaction ID:** PR375031218845

Amount of Each Receipt this Period 179.48

P/R Deduction (\$179.48 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Mr John E Bonitt

Mailing Address Eli Lilly and Company Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Eli Lilly and Company Occupation Exec Dir - Federal Government Affairs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 433.48

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

**Transaction ID:** PR375033518845

Amount of Each Receipt this Period 216.74

P/R Deduction (\$216.74 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Dr Douglas K Kelsey

Mailing Address 4906 Willow Ridge Court

City State Zip Code  
Zionsville IN 46077-9269

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

Name of Employer Eli Lilly and Company Occupation Medical Fellow I

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.40

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

**Transaction ID:** PR375084318845

Amount of Each Receipt this Period 190.20

P/R Deduction (\$190.20 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **586.42**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 40

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial)

Mrs Gail D. Cordial

Mailing Address 175 Marlin Drive

City State Zip Code  
Merritt Island FL 32952-5118

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 ▼ 261.12

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR484415118845

Amount of Each Receipt this Period

130.56

P/R Deduction (\$130.56 Monthly)

**B.**

Full Name (Last, First, Middle Initial)

Daniel M. Howle

Mailing Address 3324 Chenu Avenue

City State Zip Code  
Sacramento CA 95821-6206

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 ▼ 272.20

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR685560118845

Amount of Each Receipt this Period

136.10

P/R Deduction (\$136.10 Monthly)

**C.**

Full Name (Last, First, Middle Initial)

Susan M. Landwehr

Mailing Address 3509 Cedar Lake Avenue

City State Zip Code  
Minneapolis MN 55416-4376

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 ▼ 228.24

Date of Receipt

M M / D D / Y Y Y Y Y

Transaction ID: PR850980418845

Amount of Each Receipt this Period

114.12

P/R Deduction (\$114.12 Monthly)

**SUBTOTAL** of Receipts This Page (optional) .....

380.78

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

11719.56

**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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee</p> <p>Mailing Address 120 Maryland Avenue, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 27266698 <b>Date of Disbursement</b> 02 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 15000.00</p> <p>011 Category/ Type</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol Street SW</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 27266696 <b>Date of Disbursement</b> 02 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 10000.00</p> <p>011 Category/ Type</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) National Republican Congressional Committee</p> <p>Mailing Address 320 1st Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 27266693 <b>Date of Disbursement</b> 02 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 15000.00</p> <p>011 Category/ Type</p> <p>Contribution</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	40000.00
<b>TOTAL</b> 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

**A.** Full Name (Last, First, Middle Initial)  
National Republican Senatorial Committee

Mailing Address 425 Second Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 27266691  
Date of Disbursement

02 / 12 / 2008

Amount of Each Disbursement this Period

15000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
First State PAC

Mailing Address P.O. Box 3006

City Wilmington State DE Zip Code 19804

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: 27266703  
Date of Disbursement

02 / 12 / 2008

Amount of Each Disbursement this Period

5000.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Halvorson for Congress

Mailing Address PO Box 176

City Crete State IL Zip Code 60417

Purpose of Disbursement  
Contribution

Candidate Name  
Debbie Halvorson

011  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: IL District: 11

Transaction ID: 27365965  
Date of Disbursement

02 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

Contribution

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

21000.00

**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

<p><b>A.</b> Full Name (Last, First, Middle Initial) McGoff For Congress</p> <p>Mailing Address PO Box 44003</p> <p>City Indianapolis State IN Zip Code 46244</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Mr. John McGoff</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 05</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 27266697 <b>Date of Disbursement</b> 02 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) The Niki Tsongas Committee</p> <p>Mailing Address PO Box 1454</p> <p>City Lowell State MA Zip Code 01853</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Nicola Tsongas</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 05</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 27365958 <b>Date of Disbursement</b> 02 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Dave Camp For Congress 2008</p> <p>Mailing Address 5915 Eastman Ave. Suite 100</p> <p>City Midland State MI Zip Code 48640</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. David Lee Camp</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 27266701 <b>Date of Disbursement</b> 02 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>Contribution</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	10000.00
<b>TOTAL</b> 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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Dave Camp For Congress 2008</p> <p>Mailing Address 5915 Eastman Ave. Suite 100</p> <p>City Midland State MI Zip Code 48640</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. David Lee Camp</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 27266702</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Steve Holland For US Congress</p> <p>Mailing Address PO Box 2</p> <p>City Plantersville State MS Zip Code 38862</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Mr. Steve Holland</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2008</p>	<p><b>Transaction ID:</b> 27333019</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Reynolds For Congress</p> <p>Mailing Address PO Box 15388 Pittsford</p> <p>City Rochester State NY Zip Code 14615</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Thomas M. Reynolds</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 27333020</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>Contribution</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4500.00

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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

A.	Full Name (Last, First, Middle Initial) John Spratt For Congress Committee	Transaction ID: 27346258 Date of Disbursement 02 / 22 / 2008
	Mailing Address Post Office Box 10986	Amount of Each Disbursement this Period 1000.00
	City Rock Hill State SC Zip Code 29731	
	Purpose of Disbursement Contribution Candidate Name Rep. John Spratt, Jr. Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05	011 Category/Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

B.	Full Name (Last, First, Middle Initial) Friends Of Frank Wolf	Transaction ID: 27346265 Date of Disbursement 02 / 22 / 2008
	Mailing Address P. O. Box 710235	Amount of Each Disbursement this Period 1000.00
	City Oak Hill State VA Zip Code 20171	
	Purpose of Disbursement Contribution Candidate Name Rep. Frank R. Wolf Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 10	011 Category/Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

C.	Full Name (Last, First, Middle Initial) Enzi For US Senate	Transaction ID: 27237040 Date of Disbursement 02 / 05 / 2008
	Mailing Address PO Box 2775	Amount of Each Disbursement this Period 1000.00
	City Cody State WY Zip Code 82414	
	Purpose of Disbursement Contribution Candidate Name Sen. Michael B. Enzi Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District:	011 Category/Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	78500.00

# 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

A.	Full Name (Last, First, Middle Initial) Trip Pittman Campaign	Transaction ID: 27315960 Date of Disbursement 02 / 18 / 2008
	Mailing Address PO Box 1812	Amount of Each Disbursement this Period -1000.00
	City Daphne State AL Zip Code 36526	
	Purpose of Disbursement Void - Check Written 01/31/2008	011 Category/ Type
	Candidate Name AL Sen. Tripp Pittman	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District:	Void - Check Written 01/3-1/2008

B.	Full Name (Last, First, Middle Initial) Friends Of Debbie Halvorson	Transaction ID: 27333060 Date of Disbursement 02 / 20 / 2008
	Mailing Address PO Box 229	Amount of Each Disbursement this Period 1000.00
	City Steger State IL Zip Code 60475-0229	
	Purpose of Disbursement Debbie Halvorson, STATE SENATE 40 IL	011 Category/ Type
	Candidate Name Senator Debbie Halvorson	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District:	Debbie Halvorson, STATE SENATE 40 IL

C.	Full Name (Last, First, Middle Initial) Voters for McCarthy	Transaction ID: 27349021 Date of Disbursement 02 / 25 / 2008
	Mailing Address 14001 William Drive	Amount of Each Disbursement this Period 500.00
	City Orland Park State IL Zip Code 60462	
	Purpose of Disbursement Kevin McCarthy, STATE HOUSE 37 IL	011 Category/ Type
	Candidate Name Representa Kevin McCarthy	
	Office Sought: <input checked="" type="checkbox"/> House <input 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: IL District: 37	Kevin McCarthy, STATE HOU-SE 37 IL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	500.00
<b>TOTAL</b> 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

A.	Full Name (Last, First, Middle Initial) Friends of Dan Brady	Transaction ID: 27349013 Date of Disbursement 02 / 25 / 2008
	Mailing Address 2425 E. Lincoln Street	Amount of Each Disbursement this Period 500.00
	City Bloomington State IL Zip Code 61701-5914	
	Purpose of Disbursement Dan Brady, STATE HOUSE 88 IL	011 Category/Type
	Candidate Name Representa Dan Brady	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 88	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Dan Brady, STATE HOUSE 88 IL

B.	Full Name (Last, First, Middle Initial) Friends of Dan Reitz	Transaction ID: 27349001 Date of Disbursement 02 / 25 / 2008
	Mailing Address P.O. Box 356	Amount of Each Disbursement this Period 500.00
	City Sparta State IL Zip Code 62286-0356	
	Purpose of Disbursement Dan Reitz, STATE HOUSE 116th IL	011 Category/Type
	Candidate Name Representa Dan Reitz	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 16	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Dan Reitz, STATE HOUSE 11-6th IL

C.	Full Name (Last, First, Middle Initial) Friends of John J Millner	Transaction ID: 27349023 Date of Disbursement 02 / 25 / 2008
	Mailing Address PO Box 88801	Amount of Each Disbursement this Period 1500.00
	City Carol Stream State IL Zip Code 60188-0801	
	Purpose of Disbursement John Millner, STATE SENATE 28 IL	011 Category/Type
	Candidate Name John J Millner	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		John Millner, STATE SENATE 28 IL

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2500.00
<b>TOTAL</b> 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

A.	Full Name (Last, First, Middle Initial) Citizens for Jim Sacia	Transaction ID: 27348999 Date of Disbursement 02 / 25 / 2008
	Mailing Address P.O. Box 82	Amount of Each Disbursement this Period 500.00
	City Winnebago State IL Zip Code 61088	
	Purpose of Disbursement Jim Sacia, STATE HOUSE 89 IL	011 Category/ Type
	Candidate Name IL Rep. Jim Sacia	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 89	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Jim Sacia, STATE HOUSE 89 IL

B.	Full Name (Last, First, Middle Initial) William Davis for State Representative	Transaction ID: 27349002 Date of Disbursement 02 / 25 / 2008
	Mailing Address P.O. Box 704	Amount of Each Disbursement this Period 500.00
	City Homewood State IL Zip Code 60430	
	Purpose of Disbursement William Davis, STATE HOUSE 30 IL	011 Category/ Type
	Candidate Name IL Rep. William Davis	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 30	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		William Davis, STATE HOUSE 30 IL

C.	Full Name (Last, First, Middle Initial) Brandon Phelps for State Representative	Transaction ID: 27349012 Date of Disbursement 02 / 25 / 2008
	Mailing Address P.O. Box 401	Amount of Each Disbursement this Period 1000.00
	City Harrisburg State IL Zip Code 62946	
	Purpose of Disbursement Brandon Phelps, STATE HOUSE 118th IL	011 Category/ Type
	Candidate Name IL Rep. Brandon Phelps	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 18	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Brandon Phelps, STATE HOUSE 118th IL

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2000.00

**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)

PAGE 36 / 40

<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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Indiana Republican Party</p> <p>Mailing Address 47 South Meridian Street</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 27246291</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="07"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>Contribution</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) ELI LILLY AND COMPANY</p> <p>Mailing Address LILLY CORPORATE CENTER</p> <p>City INDIANAPOLIS State IN Zip Code 46285</p> <p>Purpose of Disbursement Reimbursement of Jim Main Refund In Error</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 27262138</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="12"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p>Reimbursement of Jim Main Refund In Error</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Charlie Brown</p> <p>Mailing Address P.O. Box 315</p> <p>City Gary State IN Zip Code 46402</p> <p>Purpose of Disbursement Charlie Brown, STATE HOUSE 3rd IN</p> <p>Candidate Name Charlie Brown</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IN District: 03</p>	<p>Transaction ID: 27365675</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="29"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>Charlie Brown, STATE HOUSE 3rd IN</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**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

<b>A.</b> Full Name (Last, First, Middle Initial) Committee to Elect Connie Lawson State Senator <hr/> Mailing Address PO Box 327 <hr/> City Danville State IN Zip Code 46122 <hr/> Purpose of Disbursement Connie Lawson, STATE SENATE 24 IN Candidate Name Connie Lawson <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 27365672 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 2500.00 <hr/> Connie Lawson, STATE SENATE 24 IN

<b>B.</b> Full Name (Last, First, Middle Initial) Fayette County Democratic Party <hr/> Mailing Address PO Box 1486 <hr/> City Lexington State KY Zip Code 40588 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> 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) ▼	Transaction ID: 27237050 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 200.00 <hr/> Contribution

<b>C.</b> Full Name (Last, First, Middle Initial) Richard Pahls State Legislature <hr/> Mailing Address 16550 Dorcas Street <hr/> City Omaha State NE Zip Code 68130 <hr/> Purpose of Disbursement Rich Pahls, STATE SENATE 31 NE Candidate Name NE Sen. Rich Pahls <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 27237034 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 500.00 <hr/> Rich Pahls, STATE SENATE 31 NE

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3200.00
<b>TOTAL</b> 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)

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Committee To Elect Lynn Wachtmann <hr/> Mailing Address 550 Euclid Ave. <hr/> City Napoleon State OH Zip Code 43545 <hr/> Purpose of Disbursement Void - Check Written 9/24/2007 Candidate Name Lynn Wachtmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 75 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 27357064 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period -350.00 <hr/> Void - Check Written 9/24- /2007

<b>B.</b> Full Name (Last, First, Middle Initial) Committee To Elect Lynn Wachtmann <hr/> Mailing Address 550 Euclid Ave. <hr/> City Napoleon State OH Zip Code 43545 <hr/> Purpose of Disbursement Lynn Wachtmann, STATE HOUSE 75 OH Candidate Name Lynn Wachtmann <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 75 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 27357066 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8
	Amount of Each Disbursement this Period 350.00 <hr/> Lynn Wachtmann, STATE HOU- SE 75 OH

<b>C.</b> Full Name (Last, First, Middle Initial) Citizens for Vincent Hughes <hr/> Mailing Address 4601 Market Street, 4th Floor Suite 431 <hr/> City Philadelphia State PA Zip Code 19139 <hr/> Purpose of Disbursement VINCENT HUGHES, STATE SENATE 7th PA Candidate Name VINCENT HUGHES <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 27246300 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 <hr/> VINCENT HUGHES, STATE SEN- ATE 7th PA

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> 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)

<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

**A.** Full Name (Last, First, Middle Initial)  
Jane Clare Orie for Senate Committee

Mailing Address P.O. Box 792

City Harrisburg State PA Zip Code 17108

Purpose of Disbursement  
JANE ORIE, STATE SENATE 40 PA

Candidate Name  
JANE ORIE

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: PA District:

Transaction ID: 27332997  
Date of Disbursement

02 / 20 / 2008

Amount of Each Disbursement this Period

500.00

JANE ORIE, STATE SENATE  
40 PA

**B.** Full Name (Last, First, Middle Initial)  
Friends of Tom Corbett

Mailing Address P.O. Box 181

City Harrisburg State PA Zip Code 17108

Purpose of Disbursement  
Tom Corbett, ATTORNEY GENERAL PA

Candidate Name  
Tom Corbett

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 27333018  
Date of Disbursement

02 / 20 / 2008

Amount of Each Disbursement this Period

1000.00

Tom Corbett, ATTORNEY GEN-  
ERAL PA

**C.** Full Name (Last, First, Middle Initial)  
Friends of Dominic Pileggi

Mailing Address 101 W. Baltimore Avenue, 2nd Floor

City Media State PA Zip Code 19063

Purpose of Disbursement  
Dominic Pileggi, STATE SENATE 9th PA

Candidate Name  
PA Sen. Dominic Pileggi

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: PA District:

Transaction ID: 27332996  
Date of Disbursement

02 / 20 / 2008

Amount of Each Disbursement this Period

2500.00

Dominic Pileggi, STATE SE-  
NATE 9th PA

**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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Garnet Coleman Campaign</p> <p>Mailing Address PO Box 88140</p> <p>City Houston State TX Zip Code 77288</p> <p>Purpose of Disbursement Garnet Coleman, STATE HOUSE 147 TX</p> <p>Candidate Name Garnet Coleman</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 47</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 27246304 <b>Date of Disbursement:</b> 02 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>011 Category/ Type</p> <p>Garnet Coleman, STATE HOUSE 147 TX</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Tommy Merritt Campaign</p> <p>Mailing Address P.O. Box 2962</p> <p>City Longview State TX Zip Code 75606</p> <p>Purpose of Disbursement TOMMY MERRITT, STATE HOUSE 7th TX</p> <p>Candidate Name TOMMY MERRITT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 07</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 27298530 <b>Date of Disbursement:</b> 02 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 750.00</p> <p>011 Category/ Type</p> <p>TOMMY MERRITT, STATE HOUSE 7th TX</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kip Averitt Campaign</p> <p>Mailing Address PO Box 20683</p> <p>City Waco State TX Zip Code 76702</p> <p>Purpose of Disbursement Kip Averitt, STATE SENATE 22 TX</p> <p>Candidate Name TX Sen. Kip Averitt</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 27298532 <b>Date of Disbursement:</b> 02 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>Kip Averitt, STATE SENATE 22 TX</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4250.00

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

24950.00