

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 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 Year-End 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 (12S)  
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  /  /  through  /  /

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 Jonathan Haug

Signature of Treasurer Jonathan Haug [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2015"/>  |                         | 825165.44                         |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 840832.99               |                                   |
| (c) Total Receipts (from Line 19) .....  | 84791.49                | 331259.04                         |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 925624.48               | 1156424.48                        |
| 7. Total Disbursements (from Line 31).....   | 70800.00                | 301600.00                         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | 854824.48               | 854824.48                         |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 29683.20                      | 74094.34                          |
| (ii) Unitemized .....   | 53608.29                      | 255605.00                         |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 83291.49                      | 329699.34                         |
| (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) .....  | 83291.49                      | 329699.34                         |
| 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.....           | 1500.00                       | 1500.00                           |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....   | 0.00                          | 59.70                             |
| 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 Transfers (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))..... ▶                        | 84791.49                      | 331259.04                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 84791.49                      | 331259.04                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated 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                          | 0.00                              |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 0.00                          | 0.00                              |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 48500.00                      | 234500.00                         |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements .....  | 22300.00                      | 67100.00                          |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated 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)) ..      | 70800.00                      | 301600.00                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 70800.00                      | 301600.00                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 83291.49                      | 329699.34                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 83291.49                      | 329699.34                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 0.00                          | 0.00                              |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 0.00                          | 0.00                              |

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

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

FOR LINE NUMBER: PAGE 6 OF 116  
(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. Jo Kathryn Goldstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Manager-IT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 437.24

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR1018322937786**  
 Amount of Each Receipt this Period 112.16  
 P/R Deduction (\$112.16 Monthly)

**B. Mr John J Ewashko**  
 Full Name (Last, First, Middle Initial)  
 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 Advisor-State Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 581.44

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR1023327437786**  
 Amount of Each Receipt this Period 148.60  
 P/R Deduction (\$148.60 Monthly)

**C. Mr Rod A. Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Manager-P2P Procrmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 218.32

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR1025150937786**  
 Amount of Each Receipt this Period 55.60  
 P/R Deduction (\$55.60 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 316.36  
**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 OF 116                |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Ms Sabrina Quarles Coleman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18300 W. Lake Desire Dr. SE  
 City Renton State WA Zip Code 98058-9568  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Account Manager-Seattle IHS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 404.56

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR1104049237786**  
 Amount of Each Receipt this Period 107.68  
 P/R Deduction (\$107.68 Monthly)

**B. Dr Michael J Coghlan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Senior Research Fellow  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 352.08

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR1158432737786**  
 Amount of Each Receipt this Period 89.34  
 P/R Deduction (\$89.34 Monthly)

**C. Sonya D Elling**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8412 Riverside Road  
 City Alexandria State VA Zip Code 22308-1545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Advisor-Federal Gov't Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.72

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR1247942437786**  
 Amount of Each Receipt this Period 191.88  
 P/R Deduction (\$191.88 Monthly)

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 388.90 |
| <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 OF 116                |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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

**A. Dr John D. Ayres**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Med Fellow-Product Safety Assessmen

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **527.80**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR1247946137786**

Amount of Each Receipt this Period **150.70**

P/R Deduction (\$150.70 Monthly)

**B. Kevin R Hern**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-LRL Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **285.08**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR1386910537786**

Amount of Each Receipt this Period **75.98**

P/R Deduction (\$75.98 Monthly)

**C. Mr William Charles Davis**  
Full Name (Last, First, Middle Initial)

Mailing Address 3 Surrey Drive

City Hurricane State WV Zip Code 25526-1627

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

Name of Employer Eli Lilly and Company Occupation Exec Sales Rep-RICHWOOD WV DIAB PC 1

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **391.08**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR1481385137786**

Amount of Each Receipt this Period **99.24**

P/R Deduction (\$99.24 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **325.92**

**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 9 OF 116  
(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. Mr Derica W Rice**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Exec VP-Global Services and CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR1550150637786**  
 Amount of Each Receipt this Period 250.00  
 P/R Deduction (\$250.00 Monthly)

**B. Jerome Edward Gadus**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 484 Hampton Drive  
 City Spartanburg State SC Zip Code 29306-5245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Sales Rep-SPARTANBURG SC BMBU PC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 299.58

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR1600922537786**  
 Amount of Each Receipt this Period 76.98  
 P/R Deduction (\$76.98 Monthly)

**c. Mr. Gary Lee Geipel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Dir-Glbl Onco Corp Affrs-TempOverla  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 323.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR1642404537786**  
 Amount of Each Receipt this Period 82.64  
 P/R Deduction (\$82.64 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 409.62  
**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 10 OF 116  
(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. Dr. Kurt Van Scoik**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Research Fellow-SMDD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 352.62

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR1645838037786**  
 Amount of Each Receipt this Period 89.64  
 P/R Deduction (\$89.64 Monthly)

**B. Dr. Jonathon D Sedgwick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Research Fellow  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 244.06

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR1647125337786**  
 Amount of Each Receipt this Period 62.38  
 P/R Deduction (\$62.38 Monthly)

**C. William F. Riesner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Assc Brand Mgr Insulin Payer Strategy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 328.50

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR1717333037786**  
 Amount of Each Receipt this Period 85.62  
 P/R Deduction (\$85.62 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 237.64  
**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 11 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Jennifer Lyn Scroggins**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Advisor-Global Corporate Reputation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **410.68**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR1717433737786**

Amount of Each Receipt this Period **112.00**

P/R Deduction (\$112.00 Monthly)

**B. Valerie T Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Consultant-Business Liaison

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **394.76**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR1736848137786**

Amount of Each Receipt this Period **102.26**

P/R Deduction (\$102.26 Monthly)

**C. James B. Myers**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Patent Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR1767500037786**

Amount of Each Receipt this Period **60.00**

P/R Deduction (\$60.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **274.26**

**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: (check only one)       | PAGE 12 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

|   |                                     |            |   |
|---|-------------------------------------|------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Jesse J Price</b>  |                                     |            | Date of Receipt   |
| Mailing Address 43 S ST NW  |                                     |            | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                               | Zip Code   | <b>Transaction ID : PR1821841937786</b>   |
| Washington  | DC                                  | 20001-1127 | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | <input type="text" value="C"/>      |            | <input type="text" value="177.58"/>   |
| Name of Employer  | Occupation                          |            | P/R Deduction (\$177.58 Monthly)  |
| Eli Lilly and Company   | Sr Advisor-Federal Gov't Affairs    |            |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼            |            |   |
|   | <input type="text" value="694.78"/> |            |   |

|   |                                     |            |   |
|---|-------------------------------------|------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Sean Donohue</b>   |                                     |            | Date of Receipt   |
| Mailing Address 2702 Summerview Way Apt. 102  |                                     |            | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                               | Zip Code   | <b>Transaction ID : PR1885869237786</b>   |
| Annapolis   | MD                                  | 21401-7711 | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | <input type="text" value="C"/>      |            | <input type="text" value="188.78"/>   |
| Name of Employer  | Occupation                          |            | P/R Deduction (\$188.78 Monthly)  |
| Eli Lilly and Company   | Sr Advisor-Federal Gov't Affairs    |            |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼            |            |   |
|   | <input type="text" value="738.62"/> |            |   |

|   |  |            |   |
|---|--|------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Kathleen St. Louis</b>   |  |            | Date of Receipt   |
| Mailing Address Lilly Corporate Center  |  |            | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                                  | Zip Code   | <b>Transaction ID : PR1916179537786</b>   |
| Indianapolis  | IN                                     | 46285-0001 | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | <input type="text" value="C"/>         |            | <input type="text" value="114.30"/>   |
| Name of Employer  | Occupation                             |            | P/R Deduction (\$114.30 Monthly)  |
| Eli Lilly and Company   | Vice President-Finance-General Auditor |            |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼               |            |   |
|   | <input type="text" value="447.18"/>    |            |   |

|  |                                     |
|--|-------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <input type="text" value="480.66"/> |
| <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 13 OF 116               |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 12  |
|   |                              | <input type="checkbox"/> 15  |
|   |                              | <input type="checkbox"/> 16  |
|   |                              | <input type="checkbox"/> 17  |

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

|   |  |                        |   |
|---|--|------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Anthony J Rumschlag</b>  |  |                        | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |  |                        | <b>Transaction ID : PR1928099137786</b>             |
| City<br>Indianapolis  | State<br>IN                                  | Zip Code<br>46285-0001 | Amount of Each Receipt this Period<br>67.84         |
| FEC ID number of contributing federal political committee.<br>C   |  |                        |   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Dir-Tech Consultant-CAH-Elanco |                        |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>265.42           |                        | P/R Deduction (\$67.84 Monthly)                     |

|   |  |                        |   |
|---|--|------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Bruce Artim</b>  |  |                        | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address P.O. Box 86<br>10810 Clermont Avenue  |  |                        | <b>Transaction ID : PR1996131337786</b>             |
| City<br>Garrett Park  | State<br>MD                                    | Zip Code<br>20896-0086 | Amount of Each Receipt this Period<br>188.62        |
| FEC ID number of contributing federal political committee.<br>C   |  |                        |   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Advisor-Federal Gov't Affairs |                        |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>754.48             |                        | P/R Deduction (\$188.62 Monthly)                    |

|   |  |                        |   |
|---|--|------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Robert Poolsawat</b>   |  |                        | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address 535 W. Duarte Rd. #40   |  |                        | <b>Transaction ID : PR1996135937786</b>             |
| City<br>Arcadia   | State<br>CA                              | Zip Code<br>91007-7339 | Amount of Each Receipt this Period<br>59.88         |
| FEC ID number of contributing federal political committee.<br>C   |  |                        |   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Consultant-Medical Liaison |                        |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>201.18       |                        | P/R Deduction (\$59.88 Monthly)                     |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 316.34 |
| <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 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Alex M Azar**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 President-Lilly USA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1664.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR2203182837786**

Amount of Each Receipt this Period **416.00**

P/R Deduction (\$416.00 Monthly)

**B. Susan C Guba**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Medical Fellow

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **402.44**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR2203236637786**

Amount of Each Receipt this Period **102.86**

P/R Deduction (\$102.86 Monthly)

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

Mailing Address 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 Dir-GPS Medical & Benefit-Risk Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **496.44**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR2208955437786**

Amount of Each Receipt this Period **136.26**

P/R Deduction (\$136.26 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **655.12**

**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 15 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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

Full Name (Last, First, Middle Initial)  
**A. Michael John Hulka**

Mailing Address 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 Director - Asst General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR2216878237786**

Amount of Each Receipt this Period **60.00**

P/R Deduction (\$60.00 Monthly)

Full Name (Last, First, Middle Initial)  
**B. Adam Nathan Booth**

Mailing Address 7310 Standifer Gap Rd # 716

City Chattanooga State TN Zip Code 37421-1469

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

Name of Employer Eli Lilly and Company Occupation Sr Sales Rep-CAH Field-Elanco

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR2225790937786**

Amount of Each Receipt this Period **55.00**

P/R Deduction (\$55.00 Monthly)

Full Name (Last, First, Middle Initial)  
**C. MARIA CROWE**

Mailing Address 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 President-Manufacturing Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1664.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR2229728337786**

Amount of Each Receipt this Period **416.00**

P/R Deduction (\$416.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **531.00**

**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 16 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Carolyn S Untz</b>   |  | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address 36 Evelyn Place   |  | <b>Transaction ID : PR2256921937786</b>             |
| City Asheville  | State NC   | Zip Code 28801-1431                                 |
| FEC ID number of contributing federal political committee.  | C  |   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Exec Sales Rep-Asheville Oncology |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>227.16                 |   |
|   |  | Amount of Each Receipt this Period<br>62.22         |
|   |  | P/R Deduction (\$62.22 Monthly)                     |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Kathleen Konka</b>   |  | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address 3531 Rockway Avenue   |  | <b>Transaction ID : PR2270419837786</b>             |
| City Annapolis  | State MD   | Zip Code 21403-4960                                 |
| FEC ID number of contributing federal political committee.  | C  |   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Advisor-Federal Government Affairs |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>274.38               |   |
|   |  | Amount of Each Receipt this Period<br>70.38         |
|   |  | P/R Deduction (\$70.38 Monthly)                     |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Jesse Jonathan Sevcik</b>  |   | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |   | <b>Transaction ID : PR2366942237786</b>             |
| City Indianapolis   | State IN                                      | Zip Code 46285-0001                                 |
| FEC ID number of contributing federal political committee.  | C   |   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Advisor - Federal Gov't Affairs |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>275.62            |   |
|   |   | Amount of Each Receipt this Period<br>73.54         |
|   |   | P/R Deduction (\$73.54 Monthly)                     |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 206.14 |
| <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 17 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Charlene McLauchlan**  
Full Name (Last, First, Middle Initial)

Mailing Address 10140 Pheasant Run Dr.

City State Zip Code  
Fresno CA 93730-0653

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

Name of Employer Occupation  
Eli Lilly and Company Sr District Sls Mgr-FAH-Elanco

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.34

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : PR2366963537786**

Amount of Each Receipt this Period  
61.42

P/R Deduction (\$61.42 Monthly)

**B. Robert A Lew**  
Full Name (Last, First, Middle Initial)

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company Senior Director-Endocrinology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.96

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : PR2398624837786**

Amount of Each Receipt this Period  
53.80

P/R Deduction (\$53.80 Monthly)

**C. Barton R Peterson**  
Full Name (Last, First, Middle Initial)

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company Sr VP-Corporate Affairs/Communications

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1664.00

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : PR2405181837786**

Amount of Each Receipt this Period  
416.00

P/R Deduction (\$416.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 531.22

**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 18 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. David A Ricks**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 VP and Pres-Lilly Bio-Medicines

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1664.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR2430399937786**

Amount of Each Receipt this Period **416.00**

P/R Deduction (\$416.00 Monthly)

**B. Marjorie Mann Craft**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Advisor - Recruiting - Elanco

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **200.86**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR2444928137786**

Amount of Each Receipt this Period **51.52**

P/R Deduction (\$51.52 Monthly)

**C. Michael Bernard O'Connor**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Advisor-State Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **336.40**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR2485319137786**

Amount of Each Receipt this Period **85.36**

P/R Deduction (\$85.36 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **552.88**

**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 19 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Gregory D Plowman**  
Full Name (Last, First, Middle Initial)

Mailing Address 1212 5th Ave  
Apt 9B

City New York State NY Zip Code 10029-5217

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

Name of Employer Eli Lilly and Company Occupation VP-Onco Research & SVP Lilly NY Resear

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.54**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : PR2543989837786**

Amount of Each Receipt this Period  
**87.04**

P/R Deduction (\$87.04 Monthly)

**B. Zeb Portanova**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Black Belt-Six Sigma

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **363.36**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : PR2552594037786**

Amount of Each Receipt this Period  
**100.68**

P/R Deduction (\$100.68 Monthly)

**C. Susan A Pisciotta**  
Full Name (Last, First, Middle Initial)

Mailing Address 2371 E Pinehurst Ave

City Fresno State CA Zip Code 93730-5950

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

Name of Employer Eli Lilly and Company Occupation Sr SIs Rep-MERCEDES CA DIAB PC 1

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : PR2552596537786**

Amount of Each Receipt this Period  
**60.00**

P/R Deduction (\$60.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **247.72**

**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 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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

|   |                                     |            |   |
|---|-------------------------------------|------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Matthew Linnik</b>   |                                     |            | Date of Receipt   |
| Mailing Address 640 S Cedros Ave  |                                     |            | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                               | Zip Code   | <b>Transaction ID : PR2560101937786</b>   |
| Solana Beach  | CA                                  | 92075-1933 | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | <input type="text" value="C"/>      |            | <input type="text" value="58.80"/>  |
| Name of Employer  | Occupation                          |            | P/R Deduction (\$58.80 Monthly)   |
| Eli Lilly and Company   | Sr Research Fellow                  |            |   |
| Receipt For:  | Aggregate Year-to-Date ▼            |            |   |
| <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="text" value="230.94"/> |            |   |

|   |                                     |            |   |
|---|-------------------------------------|------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Nicolette H. Tapay</b>   |                                     |            | Date of Receipt   |
| Mailing Address 3133 Connecticut Avenue N.W.<br>Apt. 916  |                                     |            | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                               | Zip Code   | <b>Transaction ID : PR2577304937786</b>   |
| Washington  | DC                                  | 20008-5110 | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | <input type="text" value="C"/>      |            | <input type="text" value="79.96"/>  |
| Name of Employer  | Occupation                          |            | P/R Deduction (\$79.96 Monthly)   |
| Eli Lilly and Company   | Advisor-Global Public Policy        |            |   |
| Receipt For:  | Aggregate Year-to-Date ▼            |            |   |
| <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="text" value="311.74"/> |            |   |

|   |  |            |   |
|---|--|------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Daniel Skovronsky</b>  |  |            | Date of Receipt   |
| Mailing Address 201 Highland Lane   |  |            | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                                  | Zip Code   | <b>Transaction ID : PR2597749137786</b>   |
| Bryn Mawr   | PA                                     | 19010-3708 | Amount of Each Receipt this Period  |
| FEC ID number of contributing federal political committee.  | <input type="text" value="C"/>         |            | <input type="text" value="454.92"/>   |
| Name of Employer  | Occupation                             |            | P/R Deduction (\$454.92 Monthly)  |
| Eli Lilly and Company   | Sr VP-Clinical and Product Development |            |   |
| Receipt For:  | Aggregate Year-to-Date ▼               |            |   |
| <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="text" value="1549.32"/>   |            |   |

|  |                                     |
|--|-------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <input type="text" value="593.68"/> |
| <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: (check only one)       | PAGE 21 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Dana L Brooks</b>  |  | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address 1111 Belle Pre Way<br>Apt 526   |  | <b>Transaction ID : PR2613399137786</b>             |
| City<br>Alexandria  | State<br>VA  | Zip Code<br>22314-6403                              |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>77.26          |   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Advisor-Gov't Affairs-US/Canada-Elanco | P/R Deduction (\$77.26 Monthly)                     |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>302.26                   |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Orin M Goldblum</b>  |   | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |   | <b>Transaction ID : PR2615970537786</b>             |
| City<br>Indianapolis  | State<br>IN                                 | Zip Code<br>46285-0001                              |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>54.98 |   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Medical Fellow                | P/R Deduction (\$54.98 Monthly)                     |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>214.34          |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Catherine Hinckley</b>   |  | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address 3113 44th Street NW   |  | <b>Transaction ID : PR2623467737786</b>             |
| City<br>Washington  | State<br>DC  | Zip Code<br>20016-3552                              |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>76.68        |   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Advisor-International Gov Affairs | P/R Deduction (\$76.68 Monthly)                     |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>301.68                 |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 208.92 |
| <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 22 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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

**A. Ms Julie Marie Tweedie**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 35 Loon Drive  
 City Topsham State ME Zip Code 04086-1536  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Exec Sales Rep-PORTLAND ME BMBU PC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 392.88

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR371870937786**  
 Amount of Each Receipt this Period 98.22  
 P/R Deduction (\$98.22 Monthly)

**B. Mrs Brandi T Morris**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 47 Glen St.  
 City Rowley State MA Zip Code 01969-1642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Exec Sales Rep-Tufts MA-IHS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.70

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR371871937786**  
 Amount of Each Receipt this Period 51.62  
 P/R Deduction (\$51.62 Monthly)

**C. Mr John B Quirk**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1815 Horseback Trail  
 City Vienna State VA Zip Code 22182-1813  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Director-State Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 832.62

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR371877137786**  
 Amount of Each Receipt this Period 211.26  
 P/R Deduction (\$211.26 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 361.10  
**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: (check only one)       | PAGE 23 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/>                | <input type="checkbox"/> 17  |

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

**A. Mr Jeffrey C Hurley**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Advisor-Alliance Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **340.22**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR371894537786**

Amount of Each Receipt this Period **86.96**

P/R Deduction (\$86.96 Monthly)

**B. Mr Joseph B Kelley**  
Full Name (Last, First, Middle Initial)

Mailing Address 1817 Horseback Trail

City Vienna State VA Zip Code 22182-1813

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1664.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR371907537786**

Amount of Each Receipt this Period **416.00**

P/R Deduction (\$416.00 Monthly)

**C. Mrs Katherine Andrews Bilotas**  
Full Name (Last, First, Middle Initial)

Mailing Address 28 Beechwood Road

City Braintree State MA Zip Code 02184-3711

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **301.76**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR371907837786**

Amount of Each Receipt this Period **75.44**

P/R Deduction (\$75.44 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **578.40**

**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 24 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Dr James K Malone**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Dir-Medical-Diabetes/Endo

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **463.20**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR371922137786**

Amount of Each Receipt this Period **117.96**

P/R Deduction (\$117.96 Monthly)

**B. Mr Stuart D Breslin**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-Delivery Device Res and De

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.56**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR371933237786**

Amount of Each Receipt this Period **88.64**

P/R Deduction (\$88.64 Monthly)

**C. Mr James M Sweeney**  
Full Name (Last, First, Middle Initial)

Mailing Address 115 Harrison Pl

City Massapequa State NY Zip Code 11758-7033

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

Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr-Long Island NY Diab PC

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **267.74**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR371954537786**

Amount of Each Receipt this Period **68.54**

P/R Deduction (\$68.54 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **275.14**

**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: (check only one)       | PAGE 25 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Marian Kazimierz Mosior**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Research Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 266.28

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR371960837786**  
 Amount of Each Receipt this Period 67.44  
 P/R Deduction (\$67.44 Monthly)

**B. Mr Gregory W Beeman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 32 Chestnut Lane  
 City Niskayuna State NY Zip Code 12309-1200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Director-Ethics and Compliance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 412.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR371974737786**  
 Amount of Each Receipt this Period 104.28  
 P/R Deduction (\$104.28 Monthly)

**C. Mr Stuart F Easley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Adv- Novartis Integration - Elanco  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 607.22

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR371980437786**  
 Amount of Each Receipt this Period 164.72  
 P/R Deduction (\$164.72 Monthly)

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 336.44 |
| <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 26 OF 116  
(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. Mr Mark D Argentine**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Research Advisor-SMDD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **311.42**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR372000937786**  
 Amount of Each Receipt this Period **79.16**  
 P/R Deduction (\$79.16 Monthly)

**B. Ms Deborah K Becker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-HR-Global Compensation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **329.24**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR372002937786**  
 Amount of Each Receipt this Period **92.30**  
 P/R Deduction (\$92.30 Monthly)

**C. Mr Andrew M Jackson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10839 Manor Stone Drive  
 City Highlands Ranch State CO Zip Code 80126-5719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Director-Diabetes-Mountain West Are  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **281.16**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR372005337786**  
 Amount of Each Receipt this Period **76.68**  
 P/R Deduction (\$76.68 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **248.14**  
**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: (check only one)       | PAGE 27 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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

**A. Mr Darren John Carroll**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 VP - Corporate Business Development  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **661.66**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR372008037786**  
 Amount of Each Receipt this Period **179.38**  
 P/R Deduction (\$179.38 Monthly)

**B. Mr David C Murray**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Adv-NPP-Musculoskeletal  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **280.08**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR372012937786**  
 Amount of Each Receipt this Period **71.64**  
 P/R Deduction (\$71.64 Monthly)

**C. Mr Frank D Cunningham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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-Managed Hlthcare Svcs  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **600.00**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR372029137786**  
 Amount of Each Receipt this Period **150.00**  
 P/R Deduction (\$150.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **401.02**  
**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 28 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/>                | <input type="checkbox"/> 17  |

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

**A. Ms Dana G Mercurio**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45 Homestead Rd  
 City Saratoga Springs State NY Zip Code 12866-5806  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Dist Sales Mgr-MA IHS Retail Distri  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 263.24

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372040137786**  
 Amount of Each Receipt this Period 67.76  
 P/R Deduction (\$20.00 Monthly)

**B. Ms Bernadette M Anderson-Jones**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 22 Cassandra Court  
 City Monroe State NJ Zip Code 08831-2175  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr- Philadelphia Oncology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.84

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372043237786**  
 Amount of Each Receipt this Period 68.02  
 P/R Deduction (\$68.02 Monthly)

**C. Mr Jeffrey N Simmons**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 VP and Pres-Elanco Animal Health  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372048737786**  
 Amount of Each Receipt this Period 416.00  
 P/R Deduction (\$416.00 Monthly)

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 551.78 |
| <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 29 OF 116  
(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. Mr Howard D Goldstein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Assoc Consultant-IT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 317.50

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372057937786**  
 Amount of Each Receipt this Period 80.56  
 P/R Deduction (\$80.56 Monthly)

**B. Mr Ponce DeLeon Tidwell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Assistant General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.28

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372058137786**  
 Amount of Each Receipt this Period 56.32  
 P/R Deduction (\$56.32 Monthly)

**C. Mr Thomas W Grein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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-Finance-Treasurer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 901.94

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372069237786**  
 Amount of Each Receipt this Period 228.86  
 P/R Deduction (\$228.86 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 365.74  
**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 30 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Ronald F Strauss**  
Full Name (Last, First, Middle Initial)  
Mailing Address 724 Mills Estate Place  
City Chuluota State FL Zip Code 32766-5600  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Eli Lilly and Company Occupation Sr Dist Sales Mgr-Orlando FL CAS  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 269.58

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372077137786**  
Amount of Each Receipt this Period 68.40  
P/R Deduction (\$68.40 Monthly)

**B. Mr Ashish Kalgaonkar**  
Full Name (Last, First, Middle Initial)  
Mailing Address 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 Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 333.14

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372092437786**  
Amount of Each Receipt this Period 85.76  
P/R Deduction (\$85.76 Monthly)

**C. Mr Angelo Migliorini**  
Full Name (Last, First, Middle Initial)  
Mailing Address 272 Running Water Court  
City Maple Glen State PA Zip Code 19002-1175  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr-Phil N PA Diab Spec  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 292.16

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372124437786**  
Amount of Each Receipt this Period 73.46  
P/R Deduction (\$73.46 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 227.62  
**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 31 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Martin Bott**  
Full Name (Last, First, Middle Initial)

Mailing Address 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-Finance-CFO Mfg Quality and Diabet

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **249.06**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372146437786**

Amount of Each Receipt this Period **68.10**

P/R Deduction (\$68.10 Monthly)

**B. Ms Dana Marie Bratti**  
Full Name (Last, First, Middle Initial)

Mailing Address 37 CRANDON STREET

City MELVILLE State NY Zip Code 11747-1252

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

Name of Employer Eli Lilly and Company Occupation Sr Dist Sales Mgr-New York NY CAS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **234.08**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372147537786**

Amount of Each Receipt this Period **60.56**

P/R Deduction (\$60.56 Monthly)

**C. Mrs Nancy Gilbert**  
Full Name (Last, First, Middle Initial)

Mailing Address 1 Lafayette Place

City Salem State MA Zip Code 01970-4708

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

Name of Employer Eli Lilly and Company Occupation Exec Sales Rep-BMC MA IHS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **213.56**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372164537786**

Amount of Each Receipt this Period **55.82**

P/R Deduction (\$55.82 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **184.48**

**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: (check only one)       | PAGE 32 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

|   |  |                        |  |
|---|--|------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr Jeffrey Alan Reider</b>   |  |                        | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |  |                        | <b>Transaction ID : PR372173537786</b>                           |
| City<br>Indianapolis  | State<br>IN                                      | Zip Code<br>46285-0001 | Amount of Each Receipt this Period<br>82.28                      |
| FEC ID number of contributing federal political committee.<br>C   | Name of Employer<br>Eli Lilly and Company        |                        | P/R Deduction (\$82.28 Monthly)                                  |
|   | Occupation<br>Director-Financial Global Services |                        |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>324.26               |                        |  |

|   |   |                        |  |
|---|---|------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr Kevin Robert Feese</b>  |   |                        | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>04 / 30 / 2015 |
| Mailing Address 928 Orchard Lake Dr   |   |                        | <b>Transaction ID : PR372177237786</b>                           |
| City<br>Daleville   | State<br>VA                                 | Zip Code<br>24083-3661 | Amount of Each Receipt this Period<br>112.18                     |
| FEC ID number of contributing federal political committee.<br>C   | Name of Employer<br>Eli Lilly and Company   |                        | P/R Deduction (\$112.18 Monthly)                                 |
|   | Occupation<br>Exec Sales Rep-ROANOKE VA CAS |                        |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>448.72          |                        |  |

|   |   |                        |  |
|---|---|------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Miss Jessica A Steinour</b>  |   |                        | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>04 / 30 / 2015 |
| Mailing Address 1200 Bach Lane  |   |                        | <b>Transaction ID : PR372183437786</b>                           |
| City<br>Midlothian  | State<br>VA                                       | Zip Code<br>23114-4609 | Amount of Each Receipt this Period<br>82.00                      |
| FEC ID number of contributing federal political committee.<br>C   | Name of Employer<br>Eli Lilly and Company         |                        | P/R Deduction (\$82.00 Monthly)                                  |
|   | Occupation<br>Sr Exec Sales Rep-Richmond Oncology |                        |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>328.00                |                        |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 276.46 |
| <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 33 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr W Keith Fenton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 110 Crofton Drive  
 City Pittsburgh State PA Zip Code 15238-2504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Dist Sales Mgr-Cleveland OH BMBU PC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372194037786**  
 Amount of Each Receipt this Period 60.00  
 P/R Deduction (\$60.00 Monthly)

**B. Mr Keith B Johns**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-Brand Marketing Dulaglutid  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 375.28

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372195137786**  
 Amount of Each Receipt this Period 95.74  
 P/R Deduction (\$95.74 Monthly)

**C. Dr Thomas W. Jones**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Chief Scientific Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.48

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372208737786**  
 Amount of Each Receipt this Period 61.24  
 P/R Deduction (\$61.24 Monthly)

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 216.98 |
| <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 34 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Andrew G Koustenis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Research Advisor-Clinical  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.46

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372213537786**  
 Amount of Each Receipt this Period 65.42  
 P/R Deduction (\$65.42 Monthly)

**B. Dr Mark C Lakshmanan M.D.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Medical Fellow  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 404.78

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372221637786**  
 Amount of Each Receipt this Period 103.46  
 P/R Deduction (\$103.46 Monthly)

**C. Mr Steven B Cohen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-East CAS Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 361.44

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372228337786**  
 Amount of Each Receipt this Period 92.40  
 P/R Deduction (\$92.40 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 261.28  
**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 35 OF 116  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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

**A. Mr Albert S White**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-Corporate Affairs Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.58

Date of Receipt  
 04 / 30 / 2015  
**Transaction ID : PR372229237786**  
 Amount of Each Receipt this Period 64.70  
 P/R Deduction (\$64.70 Monthly)

**B. Mr Vincent P Truax**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Product Brand Director-C/I Mkt-BIV  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 314.92

Date of Receipt  
 04 / 30 / 2015  
**Transaction ID : PR372234437786**  
 Amount of Each Receipt this Period 79.60  
 P/R Deduction (\$79.60 Monthly)

**C. Mr James Barrett Kiger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2705 Sandy Cross Road  
 City Nashville State NC Zip Code 27856-8632  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Exec Sales Rep-ROCKY MOUNT NC BMBL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.42

Date of Receipt  
 04 / 30 / 2015  
**Transaction ID : PR372260937786**  
 Amount of Each Receipt this Period 108.98  
 P/R Deduction (\$108.98 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 253.28  
**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 36 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Dr Eric C Jensen**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Senior Research Fellow

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **349.56**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372267037786**

Amount of Each Receipt this Period **89.34**

P/R Deduction (\$89.34 Monthly)

**B. Dr Steven R Maple**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-Bioprodukt Analytical Dev

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372283037786**

Amount of Each Receipt this Period **80.00**

P/R Deduction (\$80.00 Monthly)

**C. Mr Todd B Watts**  
Full Name (Last, First, Middle Initial)

Mailing Address 546 Faulkner Dr.

City Mt Pleasant State SC Zip Code 29466-8308

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

Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr- Charlotte Oncology

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372316637786**

Amount of Each Receipt this Period **100.00**

P/R Deduction (\$100.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **269.34**

**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 37 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Dr John M Mc Gill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Senior Director-Discovery Ops  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 206.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR372328137786**  
 Amount of Each Receipt this Period 52.86  
 P/R Deduction (\$52.86 Monthly)

**B. Mr Kenneth A Krause**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 Hi-Bridge Court  
 City Raleigh State NC Zip Code 27615-1451  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Acct Cnslt-Carolinas HAE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.34

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR372333537786**  
 Amount of Each Receipt this Period 69.10  
 P/R Deduction (\$69.10 Monthly)

**C. Mrs Joelle L Kendrick**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 221 Squires Pointe Rd  
 City Paris State KY Zip Code 40361-9073  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Assoc Consultant-Area Trainer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 352.46

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR372337237786**  
 Amount of Each Receipt this Period 90.74  
 P/R Deduction (\$90.74 Monthly)

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 212.70 |
| <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 38 OF 116  
(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. Mr M Johnston Erwin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-GER&D  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 207.46

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372343437786**  
 Amount of Each Receipt this Period 52.84  
 P/R Deduction (\$52.84 Monthly)

**B. Mr Stanley I Nelson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 104 Toms Chase Road  
 City Columbia State SC Zip Code 29229-8901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Exec SIs Rep-COLUMBIA E SC DIAB PC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.86

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372343737786**  
 Amount of Each Receipt this Period 57.56  
 P/R Deduction (\$57.56 Monthly)

**C. Ms Kathryn J Keith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 720 Stucco Lane  
 City Mount Pleasant State SC Zip Code 29464-8317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Acct Mgr-Onc Market-Southeast  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372350837786**  
 Amount of Each Receipt this Period 80.00  
 P/R Deduction (\$80.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 190.40  
**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 39 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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

**A. Mr Michael Dennis Overdorf**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Vice President-Corp Strategy/Six Sigma  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.38

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372361737786**  
 Amount of Each Receipt this Period 63.94  
 P/R Deduction (\$63.94 Monthly)

**B. Mr Stanley R Finnerty**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1635 Silverleaf Way  
 City Alpharetta State GA Zip Code 30005-2401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Director-Southeast BMBU PC Area  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 341.46

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372364837786**  
 Amount of Each Receipt this Period 87.48  
 P/R Deduction (\$87.48 Monthly)

**C. Dr Andrew M Dahlem**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Vice President-LRL Operations/LRL Euro  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1496.82

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372409537786**  
 Amount of Each Receipt this Period 382.56  
 P/R Deduction (\$382.56 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 533.98  
**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 40 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Ms Rebecca A Morison**  
Full Name (Last, First, Middle Initial)

Mailing Address 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-Neuro Business Unit (tempoverlap)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **219.32**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372412537786**

Amount of Each Receipt this Period **55.94**

P/R Deduction (\$55.94 Monthly)

**B. Mr David T Brooks**  
Full Name (Last, First, Middle Initial)

Mailing Address 3217 205th St.

City Olympia Fields State IL Zip Code 60461-1404

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

Name of Employer Eli Lilly and Company Occupation Exec Sales Rep-JOLIET IL DIAB SPEC3

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **345.14**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372439037786**

Amount of Each Receipt this Period **88.16**

P/R Deduction (\$88.16 Monthly)

**C. Dr James Michael McGill**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Medical Fellow-GBD Ldr-A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **540.98**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372449537786**

Amount of Each Receipt this Period **136.76**

P/R Deduction (\$136.76 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **280.86**

**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 41 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Richard K Dennis**  
Full Name (Last, First, Middle Initial)

Mailing Address 10497 Greyhawk Court

City Mechanicsville State VA Zip Code 23116-5870

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

Name of Employer Eli Lilly and Company Occupation Exec SlsRep-WASH DC Surgeon Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : PR372469237786**

Amount of Each Receipt this Period  
**60.00**

P/R Deduction (\$60.00 Monthly)

**B. Mr David A Urbanek**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-EM Mfg

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.10**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : PR372474637786**

Amount of Each Receipt this Period  
**51.40**

P/R Deduction (\$51.40 Monthly)

**C. Mr. James A Ward**  
Full Name (Last, First, Middle Initial)

Mailing Address 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-Finance-CFO Emerging Markets

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **331.68**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : PR372478537786**

Amount of Each Receipt this Period  
**82.92**

P/R Deduction (\$82.92 Monthly)

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>194.32</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 42 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Enrique A Conterno**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 VP and Pres-Lilly Diabetes  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR372480237786**  
 Amount of Each Receipt this Period  
 416.00  
 P/R Deduction (\$416.00 Monthly)

**B. Dr Cynthia A Allen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 EHS Psychologist-Corp Health Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR372513137786**  
 Amount of Each Receipt this Period  
 71.80  
 P/R Deduction (\$71.80 Monthly)

**C. Ms Stacy J Burdett**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-Leadership Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 227.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR372513437786**  
 Amount of Each Receipt this Period  
 60.86  
 P/R Deduction (\$60.86 Monthly)

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 548.66 |
| <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 43 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr R Bruce Christian</b>   |  | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address 7020 Sedgemoor Court  |  | <b>Transaction ID : PR372529537786</b>              |
| City<br>Plano   | State<br>TX  | Zip Code<br>75024-2172                              |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>73.88         |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Rgnl Acct Mgr-Rgnl Mgd Mkts South | P/R Deduction (\$73.88 Monthly)                     |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>284.18                 |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Dr Michael A Turik</b>   |  | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |  | <b>Transaction ID : PR372542937786</b>              |
| City<br>Indianapolis  | State<br>IN  | Zip Code<br>46285-0001                              |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>59.88         |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Director-Clin Pharm-Biopharmaceutic | P/R Deduction (\$59.88 Monthly)                     |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>233.46                   |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Mr Aeron P Burns</b>   |   | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address 7825 Chanticleer Circle NW  |   | <b>Transaction ID : PR372544537786</b>              |
| City<br>North Canton  | State<br>OH                                       | Zip Code<br>44720-8821                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>80.56         |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Regional Account Mgr-Onc Markets | P/R Deduction (\$80.56 Monthly)                     |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>295.30                |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 214.32 |
| <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 44 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr Newton F Crenshaw</b>   |  | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |  | <b>Transaction ID : PR372601437786</b>              |
| City<br>Indianapolis  | State<br>IN  | Zip Code<br>46285-0001                              |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>378.98        |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>VP-Onc-US/CA Bus Unit Gbl Bus Dev/Ad | P/R Deduction (\$378.98 Monthly)                    |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1485.92                |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr Stephen F Fry</b>   |   | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |   | <b>Transaction ID : PR372626437786</b>              |
| City<br>Indianapolis  | State<br>IN                                       | Zip Code<br>46285-0001                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>416.00        |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr VP-Human Resources and Diversity | P/R Deduction (\$416.00 Monthly)                    |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1664.00               |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Mr Robert B Brown</b>  |   | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |   | <b>Transaction ID : PR372709237786</b>              |
| City<br>Indianapolis  | State<br>IN                                       | Zip Code<br>46285-0001                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>90.50         |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Vice President-Marketing and CMO | P/R Deduction (\$90.50 Monthly)                     |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>354.14                |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 885.48 |
| <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 45 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Michael S Russo**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-HR-Global Security

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **263.96**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372709937786**

Amount of Each Receipt this Period **66.98**

P/R Deduction (\$66.98 Monthly)

**B. Mr Brian M Stuglik**  
Full Name (Last, First, Middle Initial)

Mailing Address 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-Marketing-Global Oncology Brands

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **254.62**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372722337786**

Amount of Each Receipt this Period **65.08**

P/R Deduction (\$65.08 Monthly)

**C. Mr David R Pugh**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-Finance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **261.22**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372748437786**

Amount of Each Receipt this Period **66.76**

P/R Deduction (\$66.76 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **198.82**

**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: (check only one) | PAGE 46 OF 116  |
| <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. Ms Dawn M Blank**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Consultant-Quality Accounts

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **209.66**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372750737786**

Amount of Each Receipt this Period **53.60**

P/R Deduction (\$53.60 Monthly)

**B. Dr Robin S Readnour**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-Product Tech Dev

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **382.38**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372802037786**

Amount of Each Receipt this Period **99.84**

P/R Deduction (\$99.84 Monthly)

**C. Ms Janice M Fiori**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Consultant-Sourcing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **204.56**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR372813937786**

Amount of Each Receipt this Period **51.14**

P/R Deduction (\$51.14 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **204.58**

**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 47 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Dr Henry U Bryant**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Research Fellow  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 463.56

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372817737786**  
 Amount of Each Receipt this Period 119.34  
 P/R Deduction (\$119.34 Monthly)

**B. Mrs Catherine S Herr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-Mfg Procurement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.54

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372820337786**  
 Amount of Each Receipt this Period 81.92  
 P/R Deduction (\$81.92 Monthly)

**C. Mr Brian J Freyberger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Advisor-HR-Strategic Business Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.60

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR372824837786**  
 Amount of Each Receipt this Period 72.60  
 P/R Deduction (\$72.60 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 273.86  
**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 48 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr Danny L Wood</b>  |                                     | Date of Receipt   |
| Mailing Address Lilly Corporate Center  |                                     | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                               | Zip Code  |
| Indianapolis  | IN                                  | 46285-0001  |
| FEC ID number of contributing federal political committee.  |                                     | Transaction ID : <b>PR372831037786</b>  |
| <input type="text" value="C"/>  |                                     | Amount of Each Receipt this Period  |
|   |                                     | <input type="text" value="164.92"/>   |
| Name of Employer  | Occupation                          | P/R Deduction (\$164.92 Monthly)  |
| Eli Lilly and Company   | Assistant General Patent Counsel    |   |
| Receipt For:  | Aggregate Year-to-Date ▼            |   |
| <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="text" value="604.78"/> |   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Cassandra Forthofer Shell</b>                                  |                                     | Date of Receipt   |
| Mailing Address Lilly Corporate Center  |                                     | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                               | Zip Code  |
| Indianapolis  | IN                                  | 46285-0001  |
| FEC ID number of contributing federal political committee.  |                                     | Transaction ID : <b>PR372834437786</b>  |
| <input type="text" value="C"/>  |                                     | Amount of Each Receipt this Period  |
|   |                                     | <input type="text" value="56.50"/>  |
| Name of Employer  | Occupation                          | P/R Deduction (\$56.50 Monthly)   |
| Eli Lilly and Company   | Director-Supply Chain-Dry Products  |   |
| Receipt For:  | Aggregate Year-to-Date ▼            |   |
| <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="text" value="219.10"/> |   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Ms Anita K Morrison</b>  |                                     | Date of Receipt   |
| Mailing Address Lilly Corporate Center  |                                     | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                               | Zip Code  |
| Indianapolis  | IN                                  | 46285-0001  |
| FEC ID number of contributing federal political committee.  |                                     | Transaction ID : <b>PR372932937786</b>  |
| <input type="text" value="C"/>  |                                     | Amount of Each Receipt this Period  |
|   |                                     | <input type="text" value="72.56"/>  |
| Name of Employer  | Occupation                          | P/R Deduction (\$72.56 Monthly)   |
| Eli Lilly and Company   | Director-CSQA                       |   |
| Receipt For:  | Aggregate Year-to-Date ▼            |   |
| <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="text" value="288.08"/> |   |

|  |                                     |
|--|-------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <input type="text" value="293.98"/> |
| <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 49 OF 116  
(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. Ms Elizabeth G O'Farrell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Chief Procurement Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **677.04**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR372946037786**  
 Amount of Each Receipt this Period **173.04**  
 P/R Deduction (\$173.04 Monthly)

**B. Ms Melissa Stapleton Barnes**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 VP-ERM & Chief Ethics and Compl Off  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **314.84**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR372956037786**  
 Amount of Each Receipt this Period **80.48**  
 P/R Deduction (\$80.48 Monthly)

**C. Mr Jonathan R Haug**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-Treasury  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **347.52**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR372962837786**  
 Amount of Each Receipt this Period **60.00**  
 P/R Deduction (\$60.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **313.52**  
**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 50 OF 116  
(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. Mr Daniel R Henricks**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-IT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 279.48

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373034337786**  
 Amount of Each Receipt this Period 70.92  
 P/R Deduction (\$70.92 Monthly)

**B. Mrs Jennifer L Oleksiw**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Vice President and Information Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 462.96

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373073737786**  
 Amount of Each Receipt this Period 118.86  
 P/R Deduction (\$118.86 Monthly)

**C. Ms Catherine U Foley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Consultant-Lrn/Dev Strategy/Port/Pgm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373141237786**  
 Amount of Each Receipt this Period 60.00  
 P/R Deduction (\$60.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 249.78  
**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 51 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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

**A. Mrs Jo A Taylor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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-Chief Customer Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.56

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR373142037786**  
 Amount of Each Receipt this Period 66.50  
 P/R Deduction (\$66.50 Monthly)

**B. Mr Samuel B Traina**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-Regulatory  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR373146637786**  
 Amount of Each Receipt this Period 100.00  
 P/R Deduction (\$100.00 Monthly)

**C. Mr Michael D Jones**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-Global Clinical Ops  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 359.56

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR373158037786**  
 Amount of Each Receipt this Period 91.90  
 P/R Deduction (\$91.90 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 258.40  
**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 52 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Ms Kimberly Kaye Rice**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Consultant-Supply Chain-Parenteral Pro

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 203.92

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373164737786**

Amount of Each Receipt this Period 51.94

P/R Deduction (\$51.94 Monthly)

**B. Mr Alonzo Weems**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Vice President-Deputy General Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 465.72

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373178637786**

Amount of Each Receipt this Period 135.18

P/R Deduction (\$135.18 Monthly)

**C. Dr Philip A Hipskind**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Research Fellow

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.88

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373251037786**

Amount of Each Receipt this Period 53.78

P/R Deduction (\$53.78 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 240.90

**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 53 OF 116              |
| <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**

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr Randy D Loser</b>   |                                     | Date of Receipt   |
| Mailing Address Lilly Corporate Center  |                                     | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                               | Zip Code  |
| Indianapolis  | IN                                  | 46285-0001  |
| FEC ID number of contributing federal political committee.  |                                     | <input type="text" value="C"/>  |
| Name of Employer  | Occupation                          | <b>Transaction ID : PR373254037786</b>  |
| Eli Lilly and Company   | Assistant General Counsel           |   |
| Receipt For:  | Aggregate Year-to-Date ▼            | Amount of Each Receipt this Period  |
| <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="text" value="210.42"/> | <input type="text" value="53.58"/>  |
|   |                                     | P/R Deduction (\$53.58 Monthly)   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mrs Nikki V Mehringer</b>                                      |                                     | Date of Receipt   |
| Mailing Address Lilly Corporate Center  |                                     | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                               | Zip Code  |
| Indianapolis  | IN                                  | 46285-0001  |
| FEC ID number of contributing federal political committee.  |                                     | <input type="text" value="C"/>  |
| Name of Employer  | Occupation                          | <b>Transaction ID : PR373254437786</b>  |
| Eli Lilly and Company   | Sr Director-Medicines Quality Org   |   |
| Receipt For:  | Aggregate Year-to-Date ▼            | Amount of Each Receipt this Period  |
| <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="text" value="413.98"/> | <input type="text" value="105.04"/>   |
|   |                                     | P/R Deduction (\$105.04 Monthly)  |

|   |                                       |   |
|---|---------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Mrs Patricia A Martin</b>                                      |                                       | Date of Receipt   |
| Mailing Address Lilly Corporate Center  |                                       | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                                 | Zip Code  |
| Indianapolis  | IN                                    | 46285-0001  |
| FEC ID number of contributing federal political committee.  |                                       | <input type="text" value="C"/>  |
| Name of Employer  | Occupation                            | <b>Transaction ID : PR373260537786</b>  |
| Eli Lilly and Company   | Sr Dir-Glbl Strat and Operations-Diab |   |
| Receipt For:  | Aggregate Year-to-Date ▼              | Amount of Each Receipt this Period  |
| <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="text" value="213.02"/>   | <input type="text" value="53.66"/>  |
|   |                                       | P/R Deduction (\$53.66 Monthly)   |

|  |                                     |
|--|-------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <input type="text" value="212.28"/> |
| <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: (check only one)       | PAGE 54 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Robert L Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-Corporate Responsibility

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.88**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR373284337786**

Amount of Each Receipt this Period **87.82**

P/R Deduction (\$87.82 Monthly)

**B. Mr Timothy Garnett**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 VP-MDU-LRL & Chief Med Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR373311837786**

Amount of Each Receipt this Period **100.00**

P/R Deduction (\$100.00 Monthly)

**C. Mr David Bruce Barnard**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **278.08**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR373344937786**

Amount of Each Receipt this Period **71.08**

P/R Deduction (\$71.08 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **258.90**

**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 55 OF 116              |
| <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. Ms Susan L Burleigh**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Consultant-HR-Projects  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 209.86

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373348137786**  
 Amount of Each Receipt this Period 53.56  
 P/R Deduction (\$53.56 Monthly)

**B. Mr Winton Darin Moody**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Corporate Engineering & Global HSE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373361937786**  
 Amount of Each Receipt this Period 100.00  
 P/R Deduction (\$100.00 Monthly)

**C. Mr Derek L Asay**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 71 Butternut Lane  
 City Basking Ridge State NJ Zip Code 07920-3303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Adv-Govt Strategy-Fed Accts-Quality  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 316.20

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373378237786**  
 Amount of Each Receipt this Period 81.24  
 P/R Deduction (\$81.24 Monthly)

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 234.80 |
| <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 56 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr David P Lewis</b>   |  | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015<br><b>Transaction ID : PR373450937786</b> |
| Mailing Address Lilly Corporate Center  |  | Amount of Each Receipt this Period<br>157.32  |
| City Indianapolis   | State IN   | Zip Code 46285-0001   |
| FEC ID number of contributing federal political committee.<br>C   |  | P/R Deduction (\$157.32 Monthly)  |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Vice President-Finance-Corporate Tax |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>620.58                 |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mrs Tracy Gill Chamberlin</b>  |   | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015<br><b>Transaction ID : PR373556037786</b> |
| Mailing Address Lilly Corporate Center  |   | Amount of Each Receipt this Period<br>89.50   |
| City Indianapolis   | State IN  | Zip Code 46285-0001   |
| FEC ID number of contributing federal political committee.<br>C   |   | P/R Deduction (\$89.50 Monthly)   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Consultant-HR-Empl Relns Operations |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>349.54                |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Mrs Denise S Bogardus</b>  |   | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015<br><b>Transaction ID : PR373558437786</b> |
| Mailing Address Lilly Corporate Center  |   | Amount of Each Receipt this Period<br>63.78   |
| City Indianapolis   | State IN                                    | Zip Code 46285-0001   |
| FEC ID number of contributing federal political committee.<br>C   |   | P/R Deduction (\$63.78 Monthly)   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Advisor-Ethics and Compliance |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>249.54          |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 310.60 |
| <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 57 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Steven P Caltrider**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Vice President-Deputy General Patent C  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 253.12

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373574337786**  
 Amount of Each Receipt this Period 64.60  
 P/R Deduction (\$64.60 Monthly)

**B. Mr Jeffrey L Bradley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Consultant Engineer - GFD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.66

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373578137786**  
 Amount of Each Receipt this Period 63.86  
 P/R Deduction (\$63.86 Monthly)

**C. Dr Paul Ahern**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 VP-Global IAPI&Dry Prod MFG/Cont Im  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373578737786**  
 Amount of Each Receipt this Period 416.00  
 P/R Deduction (\$416.00 Monthly)

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 544.46 |
| <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 58 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Brian J Kopp**  
Full Name (Last, First, Middle Initial)

Mailing Address 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-Finance-CFO Elanco Global Ops/Strat

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **239.84**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR373581037786**

Amount of Each Receipt this Period **62.18**

P/R Deduction (\$62.18 Monthly)

**B. Dr Elizabeth Claire Bearby**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Senior Director-Regulatory

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **356.14**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR373590937786**

Amount of Each Receipt this Period **91.18**

P/R Deduction (\$91.18 Monthly)

**C. Dr Vicki Poole Hoffmann**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Principal Research Scientist-Clinical

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **218.02**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR373659137786**

Amount of Each Receipt this Period **55.72**

P/R Deduction (\$55.72 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **209.08**

**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 59 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr David J. Reitz**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-Indy Facilities Mgmt & Servic

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.24

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373661337786**

Amount of Each Receipt this Period 73.64

P/R Deduction (\$73.64 Monthly)

**B. Ms Donita M Berlyn**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Consultant-Ethics and Compliance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 207.76

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373668137786**

Amount of Each Receipt this Period 51.94

P/R Deduction (\$51.94 Monthly)

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

Mailing Address 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 Assoc Consultant-GSM

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 294.18

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373770037786**

Amount of Each Receipt this Period 74.64

P/R Deduction (\$74.64 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 200.22

**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 60 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             | <input type="checkbox"/> 17  |

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

**A. Mrs Claudia Marcela Garcia-Meneses**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-Ruminants  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 355.12

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR37379837786**  
 Amount of Each Receipt this Period 90.10  
 P/R Deduction (\$90.10 Monthly)

**B. Mr Thomas W Wallace**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1181 Broad Creek Place  
 City Herndon State VA Zip Code 20170-2485  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Director-Global Advocacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 747.72

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373873237786**  
 Amount of Each Receipt this Period 191.52  
 P/R Deduction (\$191.52 Monthly)

**C. Dr Susan Mahony**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 VP and Pres-Lilly Oncology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR373922737786**  
 Amount of Each Receipt this Period 416.00  
 P/R Deduction (\$416.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 697.62  
**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 61 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Thomas E Mabry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Senior Research Scientist  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **206.86**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR374004937786**  
 Amount of Each Receipt this Period **52.48**  
 P/R Deduction (\$52.48 Monthly)

**B. Mr Mark M Ferrara**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Vice President-Human Resources  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.66**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR374007537786**  
 Amount of Each Receipt this Period **64.06**  
 P/R Deduction (\$64.06 Monthly)

**C. Mrs Ann Bromm Thomas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Consultant-Reward and Recognition  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **238.72**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR374071837786**  
 Amount of Each Receipt this Period **60.64**  
 P/R Deduction (\$60.64 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **177.18**  
**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: (check only one)       | PAGE 62 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr James B Lootens**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Corporate Secretary  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 242.06

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374084637786**  
 Amount of Each Receipt this Period 61.64  
 P/R Deduction (\$61.64 Monthly)

**B. Mr Joseph E Gallagher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Consultant-IT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 207.86

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374104137786**  
 Amount of Each Receipt this Period 53.12  
 P/R Deduction (\$53.12 Monthly)

**C. Mr DAVID Thomas NOESGES**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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-Sales-US Diabetes  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 962.74

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374108737786**  
 Amount of Each Receipt this Period 245.68  
 P/R Deduction (\$245.68 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 360.44  
**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 63 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Ms Erin B Huntington</b>   |  | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |  | <b>Transaction ID : PR374115837786</b>              |
| City<br>Indianapolis  | State<br>IN                                  | Zip Code<br>46285-0001                              |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>62.96         |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>VP-Intl Corp Affairs & Glb PRA | P/R Deduction (\$62.96 Monthly)                     |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>245.48           |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr Richard Ascroft</b>   |   | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |   | <b>Transaction ID : PR374126837786</b>              |
| City<br>Indianapolis  | State<br>IN                                     | Zip Code<br>46285-0001                              |
| FEC ID number of contributing federal political committee.<br>C   |   | Amount of Each Receipt this Period<br>94.52         |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Director-Corp Affairs-ICR & Japan | P/R Deduction (\$94.52 Monthly)                     |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>365.90              |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Ms Mary L Mochel</b>   |  | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015 |
| Mailing Address 1919 Watermark Dr. SE   |  | <b>Transaction ID : PR374129737786</b>              |
| City<br>Grand Rapids  | State<br>MI                                  | Zip Code<br>49546-6482                              |
| FEC ID number of contributing federal political committee.<br>C   |  | Amount of Each Receipt this Period<br>66.16         |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Dist Sls Mgr-Osteo Michigan | P/R Deduction (\$66.16 Monthly)                     |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>262.12           |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 223.64 |
| <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 64 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Matthew J Brooks**  
Full Name (Last, First, Middle Initial)

Mailing Address 3509 Armstrong Drive

City Bloomington State IL Zip Code 61704-2839

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

Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr-Osteo Chicago IL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.02**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374140737786**

Amount of Each Receipt this Period **65.28**

P/R Deduction (\$65.28 Monthly)

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

Mailing Address 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 Vice President-Finance-Investor Relati

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **495.60**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374142437786**

Amount of Each Receipt this Period **127.02**

P/R Deduction (\$127.02 Monthly)

**C. Mr Joseph H Marxer**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-Asst General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **223.78**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374147037786**

Amount of Each Receipt this Period **57.40**

P/R Deduction (\$57.40 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **249.70**

**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 65 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/>                | <input type="checkbox"/> 17  |

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

|   |  |                        |  |
|---|--|------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr Thomas J Assalley</b>   |  |                        | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |  |                        | <b>Transaction ID : PR374166037786</b>                           |
| City<br>Indianapolis  | State<br>IN                                | Zip Code<br>46285-0001 | Amount of Each Receipt this Period<br>86.86                      |
| FEC ID number of contributing federal political committee.<br>C   |  |                        | P/R Deduction (\$86.86 Monthly)                                  |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Dir-National Managed Care |                        |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>338.02         |                        |  |

|   |   |                        |  |
|---|---|------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr Michael J Harrington</b>  |   |                        | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |   |                        | <b>Transaction ID : PR374178637786</b>                           |
| City<br>Indianapolis  | State<br>IN                                     | Zip Code<br>46285-0001 | Amount of Each Receipt this Period<br>416.00                     |
| FEC ID number of contributing federal political committee.<br>C   |   |                        | P/R Deduction (\$416.00 Monthly)                                 |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Vice President-General Counsel |                        |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1664.00             |                        |  |

|   |                                    |                        |  |
|---|------------------------------------|------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Mr Aaron L Schacht</b>   |                                    |                        | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |                                    |                        | <b>Transaction ID : PR374184137786</b>                           |
| City<br>Indianapolis  | State<br>IN                        | Zip Code<br>46285-0001 | Amount of Each Receipt this Period<br>215.54                     |
| FEC ID number of contributing federal political committee.<br>C   |                                    |                        | P/R Deduction (\$215.54 Monthly)                                 |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>GBD Leader-Pain      |                        |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>847.88 |                        |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 718.40 |
| <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 66 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr Eric V Rouse</b>  |                                    | Date of Receipt<br>04 / 30 / 2015<br><b>Transaction ID : PR374211937786</b> |
| Mailing Address 6843 East Winchcomb   |                                    | Amount of Each Receipt this Period<br>58.02                                 |
| City<br>Scottsdale  | State<br>AZ                        | Zip Code<br>85254-3470  |
| FEC ID number of contributing federal political committee.<br>C   |                                    | P/R Deduction (\$58.02 Monthly)   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Acct Mgr-Arizona RMM |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>232.08 |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr Stephen H Jenison</b>   |  | Date of Receipt<br>04 / 30 / 2015<br><b>Transaction ID : PR374212237786</b> |
| Mailing Address Lilly Corporate Center  |  | Amount of Each Receipt this Period<br>84.76                                 |
| City<br>Indianapolis  | State<br>IN                              | Zip Code<br>46285-0001  |
| FEC ID number of contributing federal political committee.<br>C   |  | P/R Deduction (\$84.76 Monthly)   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr VP-Elanco Manufacturing |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>296.62       |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Mr Joseph A Marrs</b>  |  | Date of Receipt<br>04 / 30 / 2015<br><b>Transaction ID : PR374238137786</b> |
| Mailing Address 2830 Carriage Way   |  | Amount of Each Receipt this Period<br>65.36                                 |
| City<br>Aurora  | State<br>IL  | Zip Code<br>60504-5288  |
| FEC ID number of contributing federal political committee.<br>C   |  | P/R Deduction (\$65.36 Monthly)   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Dist Sales Mgr-Chicago IL BMBU PC |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>254.84                 |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 208.14 |
| <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 67 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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

**A. Mr Raymond E Patterson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5523 Sylvania Dr. SE  
 City Mableton State GA Zip Code 30126-5659  
 Name of Employer Eli Lilly and Company Occupation Exec Sales Rep-ATLANTA SOUTH GA BMBU  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 207.74

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374276837786**  
 Amount of Each Receipt this Period 52.52  
 P/R Deduction (\$52.52 Monthly)

**B. Ms Jamie JoAnne Oldani**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 630 N. State Street # 1708  
 City Chicago State IL Zip Code 60654-5552  
 Name of Employer Eli Lilly and Company Occupation Advisor-State Government Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 546.52

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374281037786**  
 Amount of Each Receipt this Period 140.68  
 P/R Deduction (\$140.68 Monthly)

**C. Mr Lawrence T Welch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Lilly Corporate Center  
 City Indianapolis State IN Zip Code 46285-0001  
 Name of Employer Eli Lilly and Company Occupation Assistant General Patent Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 208.56

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374313537786**  
 Amount of Each Receipt this Period 52.92  
 P/R Deduction (\$52.92 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 246.12  
**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 68 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Robert D Titus**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-Asst General Patent Course

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.24

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374321537786**

Amount of Each Receipt this Period 51.36

P/R Deduction (\$51.36 Monthly)

**B. Ms Susan C Vile**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-Global FMV and OCM CF0201

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 207.16

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374322737786**

Amount of Each Receipt this Period 54.28

P/R Deduction (\$54.28 Monthly)

**C. Mr Rob L Aukerman**  
Full Name (Last, First, Middle Initial)

Mailing Address 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-Elanco Operations (US and Canada)

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 477.42

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374323937786**

Amount of Each Receipt this Period 121.14

P/R Deduction (\$121.14 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 226.78

**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 69 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Dominic C Tumminello**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-LRL Procrmt  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.20

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374328037786**  
 Amount of Each Receipt this Period 70.58  
 P/R Deduction (\$70.58 Monthly)

**B. Mr Martin L Clemens**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Dir-Glbl Taxes-M&A Intg Ldr & Bu De  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 332.56

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374334137786**  
 Amount of Each Receipt this Period 88.66  
 P/R Deduction (\$88.66 Monthly)

**C. Mr John H Poulin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Adv-Professional Rlns  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 285.46

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374346737786**  
 Amount of Each Receipt this Period 72.16  
 P/R Deduction (\$72.16 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 231.40  
**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: PAGE 70 OF 116  
(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. Dr Gregg R Lundeen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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-MDU-BioMedicines  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **312.44**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR374349737786**  
 Amount of Each Receipt this Period **79.28**  
 P/R Deduction (\$79.28 Monthly)

**B. Mr James J Kelley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-Asst General Patent Course  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **215.74**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR374358837786**  
 Amount of Each Receipt this Period **55.06**  
 P/R Deduction (\$55.06 Monthly)

**C. Dr Thomas F Bumol**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8255 Caminito Maritimo  
 City La Jolla State CA Zip Code 92037-2204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation SVP-Biotech Discovery Res/Pres-AME-LRL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **822.50**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR374359037786**  
 Amount of Each Receipt this Period **214.58**  
 P/R Deduction (\$214.58 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **348.92**  
**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 71 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Terence W K Milton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Hospital Manager-East Region  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **279.18**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR374366937786**  
 Amount of Each Receipt this Period **71.04**  
 P/R Deduction (\$71.04 Monthly)

**B. Mrs Shelly H Shope**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Adv - HSE - Novartis Integration -Elan  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **257.44**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR374367237786**  
 Amount of Each Receipt this Period **65.92**  
 P/R Deduction (\$65.92 Monthly)

**C. Mr Eric G Cheslek**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-Engineering-IAPI  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **239.42**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR374375737786**  
 Amount of Each Receipt this Period **61.64**  
 P/R Deduction (\$61.64 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **198.60**  
**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 72 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Richard J McGrath**  
Full Name (Last, First, Middle Initial)

Mailing Address 931 Buffalo Springs Dr

City Prosper State TX Zip Code 75078-8370

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

Name of Employer Eli Lilly and Company Occupation Sr Acct Exec-Dallas HAE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **237.94**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374377637786**

Amount of Each Receipt this Period **60.82**

P/R Deduction (\$60.82 Monthly)

**B. Dr William C Weldon**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Vice Pres-Elanco Research & Developmen

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **884.40**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374378637786**

Amount of Each Receipt this Period **224.40**

P/R Deduction (\$224.40 Monthly)

**C. Mrs Lisa Churgay**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Consultant-Regulatory

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **388.58**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374379437786**

Amount of Each Receipt this Period **99.32**

P/R Deduction (\$99.32 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **384.54**

**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 73 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. Dr Norman N. Sesi</b>  |  | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |  | <b>Transaction ID : PR374380137786</b>                           |
| City Indianapolis   | State IN                                       | Zip Code 46285-0001  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Amount of Each Receipt this Period<br>64.72                      |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Engineering Advisor-Test Methods | P/R Deduction (\$64.72 Monthly)                                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>255.10             |  |

|   |  |  |
|---|--|--|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr Thomas L Curtiss</b>  |  | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>04 / 30 / 2015 |
| Mailing Address 509 Round Hollow Lane   |  | <b>Transaction ID : PR374382737786</b>                           |
| City Southlake  | State TX   | Zip Code 76092-2219  |
| FEC ID number of contributing federal political committee. <b>C</b>   |  | Amount of Each Receipt this Period<br>85.38                      |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Dir-Diabetes-South Central Diab Are | P/R Deduction (\$85.38 Monthly)                                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>332.76                   |  |

|   |   |  |
|---|---|--|
| Full Name (Last, First, Middle Initial)<br><b>C. Dr Christina Bodurow</b>   |   | Date of Receipt<br>M M M / D D D / Y Y Y Y Y Y<br>04 / 30 / 2015 |
| Mailing Address Lilly Corporate Center  |   | <b>Transaction ID : PR374383537786</b>                           |
| City Indianapolis   | State IN                                    | Zip Code 46285-0001  |
| FEC ID number of contributing federal political committee. <b>C</b>   |   | Amount of Each Receipt this Period<br>99.00                      |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Director-External Sourcing | P/R Deduction (\$99.00 Monthly)                                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>387.36          |  |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 249.10 |
| <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 74 OF 116               |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 12  |
|   |                              | <input type="checkbox"/> 16  |
|   |                              | <input type="checkbox"/> 17  |

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

**A. Mr Mark A Smith**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Adv-Commercialization Proj Mgmt-Elanco  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.34

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374383837786**  
 Amount of Each Receipt this Period 71.14  
 P/R Deduction (\$71.14 Monthly)

**B. Mr Joseph J Scholl**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12979 S. Outback Ct.  
 City Traverse City State MI Zip Code 49684-6864  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr-Grand Rapids MI BMBU P  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 254.02

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374384937786**  
 Amount of Each Receipt this Period 65.26  
 P/R Deduction (\$65.26 Monthly)

**C. Ms Jennifer L Sell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4530 Oak Leaf Dr  
 City Vadnais Heights State MN Zip Code 55127-3638  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Dir-Six Sigma Champion-Diabetes  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 241.28

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374386237786**  
 Amount of Each Receipt this Period 62.12  
 P/R Deduction (\$62.12 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 198.52  
**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 75 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mrs Maria Rovena Sondhaus**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Advisor-Ethics & Compliance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **260.02**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374392037786**

Amount of Each Receipt this Period **68.92**

P/R Deduction (\$68.92 Monthly)

**B. Mr Steven C Benz**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Dir-Litigation & Legal Compliance

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **382.84**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374400137786**

Amount of Each Receipt this Period **98.20**

P/R Deduction (\$98.20 Monthly)

**C. Mr William S Reid**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-Global Public Policy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **695.52**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374405137786**

Amount of Each Receipt this Period **178.14**

P/R Deduction (\$178.14 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **345.26**

**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 76 OF 116               |
|   | (check only one)             |                              |
| <input checked="" type="checkbox"/> 11a                                 | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 12  |
|   |                              | <input type="checkbox"/> 15  |
|   |                              | <input type="checkbox"/> 16  |
|   |                              | <input type="checkbox"/> 17  |

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

**A. Mrs Kathleen Mary Henderson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3642 South Creek Road  
 City Knoxville State TN Zip Code 37920-6287  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Exec Sales Rep-Nashville TN Sr Care  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 398.06

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374420637786**  
 Amount of Each Receipt this Period 101.00  
 P/R Deduction (\$101.00 Monthly)

**B. Mr Reginald S Angell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2030 Knoxville Rd  
 City Dry Ridge State KY Zip Code 41035-8322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Exec Sales Rep-Cincinnati Oncology  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.32

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374429937786**  
 Amount of Each Receipt this Period 112.32  
 P/R Deduction (\$112.32 Monthly)

**C. Dr John C Lechleiter**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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/Pres/CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374440637786**  
 Amount of Each Receipt this Period 416.00  
 P/R Deduction (\$416.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 629.32  
**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 77 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mrs Vicky Lynn Erwin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Advisor-Treasury  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR374448537786**  
 Amount of Each Receipt this Period 60.00  
 P/R Deduction (\$60.00 Monthly)

**B. Mr Fred L Wright**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Advisor-HR-Strategic Business Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 308.78

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR374467937786**  
 Amount of Each Receipt this Period 78.62  
 P/R Deduction (\$78.62 Monthly)

**C. Dr Charles M Beasley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 ▼ 558.16

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR374479137786**  
 Amount of Each Receipt this Period 139.54  
 P/R Deduction (\$139.54 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 278.16  
**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 78 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Patrick F Comer**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **408.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374479237786**

Amount of Each Receipt this Period **102.00**

P/R Deduction (\$102.00 Monthly)

**B. Mr Richard W Chinouth**  
Full Name (Last, First, Middle Initial)

Mailing Address 428 Matthews Mill Road

City Telford State TN Zip Code 37690-2528

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

Name of Employer Eli Lilly and Company Occupation Exec Sls Rep-Kingsport TN OSTEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **352.30**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374481037786**

Amount of Each Receipt this Period **89.32**

P/R Deduction (\$89.32 Monthly)

**C. Ms Kelley R Wright**  
Full Name (Last, First, Middle Initial)

Mailing Address 8001 Dancing Fern Trail

City Chattanooga State TN Zip Code 37421-4288

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

Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr-Chattanooga TN Diab PC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **229.50**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374483337786**

Amount of Each Receipt this Period **58.62**

P/R Deduction (\$58.62 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **249.94**

**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 79 OF 116  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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

**A. Ms Leslie North Hall**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7517 Doe Lane  
 City Henderson State KY Zip Code 42420-8951  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Exec Sls Rep-Evansville IN Osteo  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.28

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374506037786**  
 Amount of Each Receipt this Period 108.38  
 P/R Deduction (\$108.38 Monthly)

**B. Dr Timothy A Grese**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Chief Scientific Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 226.56

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374511037786**  
 Amount of Each Receipt this Period 58.32  
 P/R Deduction (\$58.32 Monthly)

**C. Mr Casey Campbell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2222 Ross Avenue  
 City Hoover State AL Zip Code 35226-6233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Exec Sales Rep-BIRMINGHAM AL DIAB SPEC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.96

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374522337786**  
 Amount of Each Receipt this Period 55.92  
 P/R Deduction (\$55.92 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 222.62  
**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 80 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mrs Laura M Swint**  
Full Name (Last, First, Middle Initial)

Mailing Address 11239 John Pugh Road

City Tanner State AL Zip Code 35671-3650

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

Name of Employer Eli Lilly and Company Occupation Sr Dist SlsMgr-New Orleans LA Diab Spe

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **229.42**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374525337786**

Amount of Each Receipt this Period **58.96**

P/R Deduction (\$58.96 Monthly)

**B. Dr Carlos O Garner**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-Global Regulatory-BioMeds

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.96**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374526437786**

Amount of Each Receipt this Period **91.92**

P/R Deduction (\$91.92 Monthly)

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

Mailing Address 8112 Henslow Court

City Montgomery State AL Zip Code 36117-7479

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **625.84**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374529837786**

Amount of Each Receipt this Period **158.80**

P/R Deduction (\$158.80 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **309.68**

**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 81 OF 116  
(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. Dr Carl L Mc Millian**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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-Toxicology/Drug Disposition/PK/PD  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **223.24**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR374534337786**  
 Amount of Each Receipt this Period **57.46**  
 P/R Deduction (\$57.46 Monthly)

**B. Dr Vijayapal R Reddy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Senior Research Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR374539537786**  
 Amount of Each Receipt this Period **60.00**  
 P/R Deduction (\$60.00 Monthly)

**C. Ms Melissa G Crusan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 647 Linden Street  
 City Shreveport State LA Zip Code 71104-4317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Dist Sls Mgr-Shreveport LA Diab PC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **204.24**

Date of Receipt **04 / 30 / 2015**  
**Transaction ID : PR374545037786**  
 Amount of Each Receipt this Period **52.38**  
 P/R Deduction (\$52.38 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **169.84**  
**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 82 OF 116  
(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. Mr Paul J Gaylo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-Asst General Patent Course  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 392.36

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374550837786**  
 Amount of Each Receipt this Period 100.10  
 P/R Deduction (\$100.10 Monthly)

**B. Mrs Dianne Black Rohm**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 Mirror Ridge Court  
 City The Woodlands State TX Zip Code 77382-2503  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Sales Rep-HOUSTON N TX DIAB SPEC1  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 228.02

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374631637786**  
 Amount of Each Receipt this Period 59.54  
 P/R Deduction (\$59.54 Monthly)

**C. Mrs Suzanne M Baker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4122 Tartan Lane  
 City Houston State TX Zip Code 77025-2920  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Acct Mgr-HCSC RMM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 276.34

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374632937786**  
 Amount of Each Receipt this Period 72.58  
 P/R Deduction (\$72.58 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 232.22  
**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 83 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   |   | <input type="checkbox"/> 15  |
|   |   | <input type="checkbox"/> 16  |
|   |   | <input type="checkbox"/> 17  |

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

**A. Ms Marianne Matzke**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 875 Tanglewood Drive  
 City Weatherford State TX Zip Code 76087-8141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr-Osteo Denver CO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 257.20

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374647637786**  
 Amount of Each Receipt this Period 65.26  
 P/R Deduction (\$65.26 Monthly)

**B. Mr Wei-Li Shao**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-Alzheimer's Business Unit  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 352.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374657337786**  
 Amount of Each Receipt this Period 106.78  
 P/R Deduction (\$106.78 Monthly)

**C. Dr Judy E Graham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4303 Somerville Ave.  
 City Dallas State TX Zip Code 75206-5441  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Acct Mgr-Texas RMM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 253.02

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374659737786**  
 Amount of Each Receipt this Period 64.44  
 P/R Deduction (\$64.44 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 236.48  
**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: (check only one) | PAGE 84 OF 116  |
| <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. Dr Edward D McGruder**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Dir - Acquisitions/STI - Elanco

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374671437786**

Amount of Each Receipt this Period **100.00**

P/R Deduction (\$100.00 Monthly)

**B. Mr Wayne R Mielke**  
Full Name (Last, First, Middle Initial)

Mailing Address 524 E. Lakebrook Lane

City Eagle State ID Zip Code 83616-5528

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

Name of Employer Eli Lilly and Company Occupation Sr Dist Sls Mgr-San Fran CA Diab Spec

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **295.20**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374680037786**

Amount of Each Receipt this Period **73.80**

P/R Deduction (\$73.80 Monthly)

**C. Mr Scott W Andersen**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Senior Research Scientist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **221.60**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374682237786**

Amount of Each Receipt this Period **56.84**

P/R Deduction (\$56.84 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **230.64**

**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 85 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Nathaniel R Miles**  
Full Name (Last, First, Middle Initial)

Mailing Address 4552 130th Place S.E.

|                  |             |                        |
|------------------|-------------|------------------------|
| City<br>Bellevue | State<br>WA | Zip Code<br>98006-2051 |
|------------------|-------------|------------------------|

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

|   |  |
|---|--|
| Name of Employer<br>Eli Lilly and Company | Occupation<br>Advisor-State Government Affairs |
|---|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **704.48**

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 30    | / | 2015        |

**Transaction ID : PR374703437786**

Amount of Each Receipt this Period  

|        |
|--------|
| 176.12 |
|--------|

P/R Deduction (\$176.12 Monthly)

**B. Mrs Mary A Stumph**  
Full Name (Last, First, Middle Initial)

Mailing Address 2936 44th Avenue Northeast

|                |             |                        |
|----------------|-------------|------------------------|
| City<br>Tacoma | State<br>WA | Zip Code<br>98422-2807 |
|----------------|-------------|------------------------|

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

|   |  |
|---|--|
| Name of Employer<br>Eli Lilly and Company | Occupation<br>Sr Acct Mgr-Onc Market-Northwest |
|---|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **287.60**

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 30    | / | 2015        |

**Transaction ID : PR374713037786**

Amount of Each Receipt this Period  

|       |
|-------|
| 76.04 |
|-------|

P/R Deduction (\$76.04 Monthly)

**C. Mr Sean K O'Farrell**  
Full Name (Last, First, Middle Initial)

Mailing Address Lilly Corporate Center

|                      |             |                        |
|----------------------|-------------|------------------------|
| City<br>Indianapolis | State<br>IN | Zip Code<br>46285-0001 |
|----------------------|-------------|------------------------|

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

|   |                           |
|---|---------------------------|
| Name of Employer<br>Eli Lilly and Company | Occupation<br>Director-IT |
|---|---------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **257.10**

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 30    | / | 2015        |

**Transaction ID : PR374717437786**

Amount of Each Receipt this Period  

|       |
|-------|
| 66.66 |
|-------|

P/R Deduction (\$66.66 Monthly)

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>318.82</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 86 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Dr Jeffrey N Levy**  
Full Name (Last, First, Middle Initial)

Mailing Address 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-Tech Services / Mfg Science

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **241.22**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374759237786**

Amount of Each Receipt this Period **61.64**

P/R Deduction (\$61.64 Monthly)

**B. Dr Daniel Raymond Brady**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Senior Advisor-Regulatory

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **280.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374773737786**

Amount of Each Receipt this Period **70.00**

P/R Deduction (\$70.00 Monthly)

**C. Mrs Terri L Grant**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Vice President-Human Resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **284.52**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374791437786**

Amount of Each Receipt this Period **72.72**

P/R Deduction (\$72.72 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **204.36**

**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 87 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mrs Phyllis Barkman Ferrell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 GBD Leader  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 730.20

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374803637786**  
 Amount of Each Receipt this Period 187.98  
 P/R Deduction (\$187.98 Monthly)

**B. Mr Robert B Galloway**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 208 Kensington Way  
 City Booneville State MS Zip Code 38829-5425  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Sr Exec Sales Rep-TUPELO MS BMBU PC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.16

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374831537786**  
 Amount of Each Receipt this Period 55.46  
 P/R Deduction (\$55.46 Monthly)

**C. David R Herrin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Advisor-Alliance Management  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.90

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR374833337786**  
 Amount of Each Receipt this Period 62.84  
 P/R Deduction (\$62.84 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 306.28  
**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 88 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mr Joshua L Smiley**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 VP-Finance and CFO LRL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **342.22**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374850137786**

Amount of Each Receipt this Period **88.72**

P/R Deduction (\$88.72 Monthly)

**B. Mr John H Palacios**  
Full Name (Last, First, Middle Initial)

Mailing Address 380 West 22nd street. Unit #215

City Kansas City State MO Zip Code 64108-2052

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

Name of Employer Eli Lilly and Company Occupation Sr Dist Sales Mgr-Kansas City KS CAS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374872937786**

Amount of Each Receipt this Period **60.00**

P/R Deduction (\$60.00 Monthly)

**C. Dr Venkatesh Krishnan**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 CSO-Musculoskeletal-Biology

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.86**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374875737786**

Amount of Each Receipt this Period **108.74**

P/R Deduction (\$108.74 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **257.46**

**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 89 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mrs Mary Jo Wilmes**  
Full Name (Last, First, Middle Initial)

Mailing Address 17619 North 56th Place

City State Zip Code  
Scottsdale AZ 85254-6419

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

Name of Employer Occupation  
Eli Lilly and Company Consultant-Clin Development Liaison

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
213.06

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : PR374901437786**

Amount of Each Receipt this Period  
54.06

P/R Deduction (\$54.06 Monthly)

**B. Mr Thane E Wettig**  
Full Name (Last, First, Middle Initial)

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company VP-Marketing-Global Diabetes Brands

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
473.28

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : PR374924437786**

Amount of Each Receipt this Period  
120.96

P/R Deduction (\$120.96 Monthly)

**C. Dr J. Anthony Ware**  
Full Name (Last, First, Middle Initial)

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company Senior VP-Prod Dev-Lilly Biomedicines

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
446.14

Date of Receipt  
04 / 30 / 2015  
**Transaction ID : PR374935837786**

Amount of Each Receipt this Period  
115.66

P/R Deduction (\$115.66 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 290.68

**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 90 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

|   |                                       |   |
|---|---------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Mr Jerry G Wicks</b>   |                                       | Date of Receipt   |
| Mailing Address 1242 Terrace Court  |                                       | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                                 | Zip Code  |
| Vacaville   | CA                                    | 95687-6579  |
| FEC ID number of contributing federal political committee.  |                                       | <input type="text" value="C"/>  |
| Name of Employer  | Occupation                            | <b>Transaction ID : PR374950637786</b>  |
| Eli Lilly and Company   | Sr Exec Sls Rep-SANTA ROSA CA DIAB PC |   |
| Receipt For:  | Aggregate Year-to-Date ▼              | Amount of Each Receipt this Period  |
| <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="text" value="211.56"/>   | <input type="text" value="54.06"/>  |
|   |                                       | P/R Deduction (\$54.06 Monthly)   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mr Marcelo E Kort</b>  |                                     | Date of Receipt   |
| Mailing Address 8002 Galileo Way  |                                     | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                               | Zip Code  |
| Littleton   | CO                                  | 80125-1812  |
| FEC ID number of contributing federal political committee.  |                                     | <input type="text" value="C"/>  |
| Name of Employer  | Occupation                          | <b>Transaction ID : PR374950637786</b>  |
| Eli Lilly and Company   | Consultant-US Advocacy              |   |
| Receipt For:  | Aggregate Year-to-Date ▼            | Amount of Each Receipt this Period  |
| <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="text" value="211.52"/> | <input type="text" value="52.88"/>  |
|   |                                     | P/R Deduction (\$52.88 Monthly)   |

|   |                                     |   |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Dr John E Munroe</b>   |                                     | Date of Receipt   |
| Mailing Address 1205 Pacific Hwy #2906  |                                     | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City  | State                               | Zip Code  |
| San Diego   | CA                                  | 92101-8467  |
| FEC ID number of contributing federal political committee.  |                                     | <input type="text" value="C"/>  |
| Name of Employer  | Occupation                          | <b>Transaction ID : PR374966637786</b>  |
| Eli Lilly and Company   | Sr Director-DCRT                    |   |
| Receipt For:  | Aggregate Year-to-Date ▼            | Amount of Each Receipt this Period  |
| <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <input type="text" value="213.54"/> | <input type="text" value="54.18"/>  |
|   |                                     | P/R Deduction (\$54.18 Monthly)   |

|  |                                     |
|--|-------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <input type="text" value="161.12"/> |
| <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: (check only one)       | PAGE 91 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Mrs Charlene A Broman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10442 Toledo Drive  
 City State Zip Code  
 Brooklyn Park MN 55443-4501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Eli Lilly and Company Sr Dist Sls Mgr-Minn MN Diab Spec  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 253.34

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR374983037786**  
 Amount of Each Receipt this Period  
 64.28  
 P/R Deduction (\$64.28 Monthly)

**B. Mr Francis M Fitzgerald**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3074 Summergate Lane  
 City State Zip Code  
 Okemos MI 48864-5918  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Eli Lilly and Company Advisor-State Government Affairs  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 635.56

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR374987537786**  
 Amount of Each Receipt this Period  
 161.26  
 P/R Deduction (\$161.26 Monthly)

**C. Mr Brian R Rittgers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Lilly Corporate Center  
 City State Zip Code  
 Indianapolis IN 46285-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Eli Lilly and Company Advisor-Global Development/Coach  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 318.14

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR374987937786**  
 Amount of Each Receipt this Period  
 80.12  
 P/R Deduction (\$80.12 Monthly)

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 305.66 |
| <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 92 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Dr John M Beals**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Research Fellow

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **212.64**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374992337786**

Amount of Each Receipt this Period **55.32**

P/R Deduction (\$55.32 Monthly)

**B. Ms Joan G Solem**  
Full Name (Last, First, Middle Initial)

Mailing Address 443 Golden Lane

City Longmont State CO Zip Code 80504-1315

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **285.32**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR374998137786**

Amount of Each Receipt this Period **72.92**

P/R Deduction (\$72.92 Monthly)

**C. Mr Brice H Dunshee**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Director-Cust Cap/Analytics

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **375.60**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR375008337786**

Amount of Each Receipt this Period **95.58**

P/R Deduction (\$95.58 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **223.82**

**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 93 OF 116  
(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. Dr Albert J Allen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Medical Fellow  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 231.46

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR375012537786**  
 Amount of Each Receipt this Period 59.68  
 P/R Deduction (\$59.68 Monthly)

**B. Dr Jacqueline S-A Larew**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Dir-QA-Business Units and Local CMO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR375022037786**  
 Amount of Each Receipt this Period 93.00  
 P/R Deduction (\$93.00 Monthly)

**C. Ms Yolanda L Taylor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-GMC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 30 / 2015  
**Transaction ID : PR375025037786**  
 Amount of Each Receipt this Period 60.00  
 P/R Deduction (\$60.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional).....▶ 212.68  
**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 94 OF 116  
(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**

Full Name (Last, First, Middle Initial)  
**A. 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 Occupation  
Eli Lilly and Company Advisor-State Government Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **770.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : PR375031237786**

Amount of Each Receipt this Period  
**192.50**

P/R Deduction (\$192.50 Monthly)

Full Name (Last, First, Middle Initial)  
**B. Ms Julianne E Ungerman**

Mailing Address 1149 Elm Drive

City State Zip Code  
Webster Groves MO 63119-4734

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

Name of Employer Occupation  
Eli Lilly and Company Exec Sales Rep-St Louis W MO Sr Care

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **381.68**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : PR375045637786**

Amount of Each Receipt this Period  
**95.42**

P/R Deduction (\$95.42 Monthly)

Full Name (Last, First, Middle Initial)  
**C. Miss Ashley Diaz-Granados**

Mailing Address Lilly Corporate Center

City State Zip Code  
Indianapolis IN 46285-0001

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

Name of Employer Occupation  
Eli Lilly and Company Sr Director-Integrated Health Systems

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **588.64**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**04 / 30 / 2015**

**Transaction ID : PR375047937786**

Amount of Each Receipt this Period  
**163.78**

P/R Deduction (\$163.78 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **451.70**

**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 95 OF 116  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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

**A. Mr Michael L Broughton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Director-Global Logistics  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 293.90

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR375052937786**  
 Amount of Each Receipt this Period 74.30  
 P/R Deduction (\$74.30 Monthly)

**B. Ms Dana J Garel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1890 Avenida Martina  
 City Roseville State CA Zip Code 95747-5905  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Eli Lilly and Company Occupation Consultant-US Advocacy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 223.44

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR375076037786**  
 Amount of Each Receipt this Period 55.86  
 P/R Deduction (\$55.86 Monthly)

**C. Mr David S Kinard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 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 Vice President-Human Resources  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 304.36

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR375082637786**  
 Amount of Each Receipt this Period 78.64  
 P/R Deduction (\$78.64 Monthly)

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 208.80 |
| <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 96 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. Dr Ludmila A Kryzhanovskaya**

Full Name (Last, First, Middle Initial)  
Mailing Address 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 Medical Fellow

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.26

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR375185937786**

Amount of Each Receipt this Period  
 51.44

P/R Deduction (\$51.44 Monthly)

**B. Dr Joseph D. Boivin**

Full Name (Last, First, Middle Initial)  
Mailing Address 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 Consultant-Medical Liaison

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.52

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR484400037786**

Amount of Each Receipt this Period  
 59.92

P/R Deduction (\$59.92 Monthly)

**C. Mr Nathan J. Murray**

Full Name (Last, First, Middle Initial)  
Mailing Address 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 Product Brand Dir-Payer Mktg-Cardio

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.62

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR484468037786**

Amount of Each Receipt this Period  
 52.28

P/R Deduction (\$52.28 Monthly)

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 163.64 |
| <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 97 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

**A. David C. Thomas**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 Manager-IT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **226.62**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR484476037786**

Amount of Each Receipt this Period **57.60**

P/R Deduction (\$57.60 Monthly)

**B. Dr Robert Metcalf**  
Full Name (Last, First, Middle Initial)

Mailing Address 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 and Quali

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR484479137786**

Amount of Each Receipt this Period **100.00**

P/R Deduction (\$100.00 Monthly)

**C. Daniel M. Howle**  
Full Name (Last, First, Middle Initial)

Mailing Address 930 Tahoe Blvd Suite 802-351

City Incline Village State NV Zip Code 89451-9451

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **626.00**

Date of Receipt **04 / 30 / 2015**

**Transaction ID : PR685560137786**

Amount of Each Receipt this Period **158.84**

P/R Deduction (\$158.84 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... **316.44**

**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 98 OF 116               |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
|   | <input type="checkbox"/> 13             | <input type="checkbox"/> 14  |
|   | <input type="checkbox"/> 11c            | <input type="checkbox"/> 12  |
|   | <input type="checkbox"/> 15             | <input type="checkbox"/> 16  |
|   | <input type="checkbox"/> 17             |                              |

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

|   |                                    |   |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Janet Elizabeth Roepke</b>   |                                    | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015<br><b>Transaction ID : PR697285937786</b> |
| Mailing Address Lilly Corporate Center  |                                    | Amount of Each Receipt this Period<br>100.00  |
| City Indianapolis   | State IN                           | Zip Code 46285-0001   |
| FEC ID number of contributing federal political committee.<br>C   |                                    | P/R Deduction (\$100.00 Monthly)  |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Sr Medical Advisor   |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>400.00 |   |

|   |                                       |   |
|---|---------------------------------------|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Ms Mary L Kaneaster</b>  |                                       | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015<br><b>Transaction ID : PR850966537786</b> |
| Mailing Address 501 N. Clinton Street #2706   |                                       | Amount of Each Receipt this Period<br>55.98   |
| City Chicago  | State IL                              | Zip Code 60654-8889   |
| FEC ID number of contributing federal political committee.<br>C   |                                       | P/R Deduction (\$55.98 Monthly)   |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Acct Mgr-Chicago IL RMM |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>214.86    |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Susan Landwehr Marshall</b>  |  | Date of Receipt<br>MM / DD / YYYY<br>04 / 30 / 2015<br><b>Transaction ID : PR850980437786</b> |
| Mailing Address 4241 Basswood Road  |  | Amount of Each Receipt this Period<br>149.56  |
| City Minneapolis  | State MN                                       | Zip Code 55416-3848   |
| FEC ID number of contributing federal political committee.<br>C   |  | P/R Deduction (\$149.56 Monthly)  |
| Name of Employer<br>Eli Lilly and Company   | Occupation<br>Advisor-State Government Affairs |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>576.88             |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 305.54 |
| <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 99 OF 116  
(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. Mr Daniel E Baker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21655 North 74th Way  
 City State Zip Code  
 Scottsdale AZ 85255-4728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Eli Lilly and Company Sr Dist Sales Mgr-Phoenix AZ CAS  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 234.62

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR850986037786**  
 Amount of Each Receipt this Period  
 60.50  
 P/R Deduction (\$60.50 Monthly)

**B. Ms Marie Rush**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 Pewter Circle  
 City State Zip Code  
 Chester NY 10918-3134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Eli Lilly and Company Sales Rep-Teaneck NJ MH  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 260.28

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR867100237786**  
 Amount of Each Receipt this Period  
 69.60  
 P/R Deduction (\$69.60 Monthly)

**C. Mr Keith Andrew Lamson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Lilly Corporate Center  
 City State Zip Code  
 Indianapolis IN 46285-0001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Eli Lilly and Company Assoc Sr Consultant Engineer - Project  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 212.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2015  
**Transaction ID : PR952601337786**  
 Amount of Each Receipt this Period  
 54.36  
 P/R Deduction (\$54.36 Monthly)

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 184.46   |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 29683.20 |

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 OF 116  
(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. Mikulski For Senate Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 13147  
 City Baltimore State MD Zip Code 21203  
 FEC ID number of contributing federal political committee. **C** C00199273  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 07 / 2015  
**Transaction ID : 38070843**  
 Amount of Each Receipt this Period  
 1500.00  
 PAC Contribution Refund Check Written 04.19.2014

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 1500.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 1500.00 |

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

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NAME OF COMMITTEE (In Full)

**ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. Friends of Patrick Murphy

Mailing Address 4521 Pga Blvd. #412

City State Zip Code  
Palm Beach Gardens FL 33418

Purpose of Disbursement  
Contribution

011

Candidate Name

**Patrick Murphy**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: FL District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 06    | / | 2015        |

Transaction ID : 38066693

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

### B. Carper For Senate

Mailing Address PO Box 2882

City State Zip Code  
Wilmington DE 19805

Purpose of Disbursement  
Contribution

011

Candidate Name

**Sen. Thomas R. Carper**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: DE District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 06    | / | 2015        |

Transaction ID : 38066694

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Contribution

Full Name (Last, First, Middle Initial)

### C. Cory Booker For Senate

Mailing Address PO Box 32237

City State Zip Code  
Newark NJ 07102

Purpose of Disbursement  
Contribution

011

Candidate Name

**Sen. Cory Booker**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: NJ District:

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 04    | / | 06    | / | 2015        |

Transaction ID : 38066745

Amount of Each Disbursement this Period

|         |
|---------|
| 1500.00 |
|---------|

Contribution

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

|         |
|---------|
| 3500.00 |
|---------|

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

|  |
|--|
|  |
|--|

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Renee Ellmers For Congress Committee**

Mailing Address PO Box 99567

City Raleigh State NC Zip Code 27624

Purpose of Disbursement Contribution

Candidate Name  
**Rep. Renee Ellmers RN**

Office Sought:  House  Senate  President  
State: NC District: 02  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 06 / 2015

**Transaction ID : 38066746**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Himes For Congress**

Mailing Address 857 Post Road, #312

City Fairfield State CT Zip Code 06824

Purpose of Disbursement Contribution

Candidate Name  
**Rep. Jim A. Himes**

Office Sought:  House  Senate  President  
State: CT District: 04  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Convention2016

Date of Disbursement

MM / DD / YYYY  
04 / 06 / 2015

**Transaction ID : 38066747**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Kind For Congress Committee**

Mailing Address 205 5th Avenue South

City La Crosse State WI Zip Code 54601

Purpose of Disbursement Contribution

Candidate Name  
**Rep. Ron Kind**

Office Sought:  House  Senate  President  
State: WI District: 03  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 06 / 2015

**Transaction ID : 38066748**

Amount of Each Disbursement this Period

1500.00

Contribution

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

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

3500.00

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

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

Full Name (Last, First, Middle Initial)

**A. Gene Green Congressional Campaign**

Mailing Address PO Box 16128

City Houston State TX Zip Code 77222

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Gene Green**

Office Sought:  House  
 Senate  
 President  
State: TX District: 29

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 38066749**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Contribution

Full Name (Last, First, Middle Initial)

**B. Guthrie For Congress**

Mailing Address PO Box 9639

City Bowling Green State KY Zip Code 42102

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Brett Guthrie**

Office Sought:  House  
 Senate  
 President  
State: KY District: 02

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 38066750**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Contribution

Full Name (Last, First, Middle Initial)

**C. Brady For Congress**

Mailing Address PO Box 8277

City The Woodlands State TX Zip Code 77387

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Kevin Patrick Brady**

Office Sought:  House  
 Senate  
 President  
State: TX District: 08

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 6 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 38066756**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Contribution

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

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 3 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Virginia Foxx For Congress**

Mailing Address P.O. Box 2767

City Boone State NC Zip Code 28607

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Virginia Foxx**

Office Sought:  House  
 Senate  
 President  
State: NC District: 05

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 06 / 2015

**Transaction ID : 38066767**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Katherine Clark For Congress**

Mailing Address PO Box 361

City Malden State MA Zip Code 02148

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Katherine Clark**

Office Sought:  House  
 Senate  
 President  
State: MA District: 05

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 06 / 2015

**Transaction ID : 38066770**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends Of Michelle**

Mailing Address P.O. Box 25422

City Albuquerque State NM Zip Code 87125

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Michelle Lujan Grisham**

Office Sought:  House  
 Senate  
 President  
State: NM District: 01

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 06 / 2015

**Transaction ID : 38066772**

Amount of Each Disbursement this Period

1000.00

Contribution

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

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

3000.00



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

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

Full Name (Last, First, Middle Initial)

**A. Friends Of Susan Brooks**

Mailing Address 9425 N Meridian Street  
# 237

City Indianapolis State IN Zip Code 46260

Purpose of Disbursement  
Contribution

011

Candidate Name

**Ms. Susan Brooks**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IN District: 05

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2015

**Transaction ID : 38106308**

Amount of Each Disbursement this Period

2000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Stutzman For Congress**

Mailing Address PO Box 129

City Howe State IN Zip Code 46746

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. Marlin Stutzman**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IN District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2015

**Transaction ID : 38106309**

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Moderate Democrats PAC**

Mailing Address 303 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Moderate Democrats PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2015

**Transaction ID : 38106310**

Amount of Each Disbursement this Period

5000.00

Contribution

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

9500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Friends Of Todd Young, Inc.**

Mailing Address PO Box 1053

City State Zip Code  
Bloomington IN 47402

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Rep. Todd Young**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IN District: 09

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 38106311**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

Contribution

Full Name (Last, First, Middle Initial)

**B. Cathy McMorris Rodgers For Congress**

Mailing Address Box 137

City State Zip Code  
Spokane WA 99210

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

**Rep. Cathy McMorris Rodgers**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WA District: 05

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 38106315**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

Contribution

Full Name (Last, First, Middle Initial)

**C. M-PAC**

Mailing Address 700 13th Street, NW  
Suite 600

City State Zip Code  
Washington DC 20005

Purpose of Disbursement  
Contribution

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 3 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 38106317**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

Contribution

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

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 4 | 5 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

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

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 4 | 5 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Chris Coons For Delaware**

Mailing Address PO Box 9900

City Newark State DE Zip Code 19714

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. Christopher Coons**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: DE District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2015

Transaction ID : 38106319

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Butterfield For Congress**

Mailing Address 434 Fayetteville Street  
Suite 2020

City Raleigh State NC Zip Code 27601

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. George K. Butterfield**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NC District: 01

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2015

Transaction ID : 38106320

Amount of Each Disbursement this Period

2500.00

Contribution

Full Name (Last, First, Middle Initial)

**C. BRIDGE PAC**

Mailing Address 499 S. Capitol Street, SW  
Suite 422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**BRIDGE PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2015

Transaction ID : 38106321

Amount of Each Disbursement this Period

5000.00

Contribution

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

8500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Friends Of Jim Clyburn**

Mailing Address Post Office Box 12567

City Columbia State SC Zip Code 29211

Purpose of Disbursement  
Contribution

Candidate Name  
**Rep. James E. Clyburn**

Office Sought:  House  
 Senate  
 President  
State: SC District: 06

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2015

**Transaction ID : 38106323**

Amount of Each Disbursement this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. People For Ben**

Mailing Address PO Box 31129

City Santa Fe State NM Zip Code 87594

Purpose of Disbursement  
Contribution

Candidate Name  
**Rep. Ben Ray Lujan Jr.**

Office Sought:  House  
 Senate  
 President  
State: NM District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 23 / 2015

**Transaction ID : 38106325**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Gary Palmer For Congress**

Mailing Address 1919 Oxmoor Rd #235

City Homewood State AL Zip Code 35209

Purpose of Disbursement  
Contribution

Candidate Name  
**Rep. Gary Palmer**

Office Sought:  House  
 Senate  
 President  
State: AL District: 06

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2015

**Transaction ID : 38133154**

Amount of Each Disbursement this Period

1000.00

Contribution

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

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

7000.00

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

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

Full Name (Last, First, Middle Initial)

**A. Bluegrass Committee**

Mailing Address 220 1/2 E Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Contribution

011

Candidate Name

**Bluegrass Committee**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 38133155**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

Contribution

Full Name (Last, First, Middle Initial)

**B. Friends Of John Thune**

Mailing Address PO Box 841

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement  
Contribution

011

Candidate Name

**Sen. John R. Thune**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: SD District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 38133157**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends Of John Thune**

Mailing Address PO Box 841

City Sioux Falls State SD Zip Code 57101

Purpose of Disbursement  
Contribution

011

Candidate Name

**Sen. John R. Thune**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: SD District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 38133159**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

Contribution

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 3 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 3 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. The Congressman Joe Barton Committee**

Mailing Address P.O. Box 1444

City Ennis State TX Zip Code 75120

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Joe L. Barton**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TX District: 06

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2015

**Transaction ID : 38133164**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Committee To Re-Elect Linda Sanchez**

Mailing Address 410 1st St Se  
Suite 310

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Contribution

011

Candidate Name

**Rep. Linda T. Sanchez**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 38

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 29 / 2015

**Transaction ID : 38133175**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Contribution

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

2000.00

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

48500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Glazer for Senate 2015**

Mailing Address 23 Orinda Way Suite 305

City Orinda State CA Zip Code 94563

Purpose of Disbursement  
Steve Glazer, STATE SENATE 7th CA

011

Candidate Name  
**Steve Glazer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 7 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 38066822**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|
| 4 | 2 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

Steve Glazer, STATE SENATE 7th CA

Full Name (Last, First, Middle Initial)

**B. Friends of Eli Evankovich**

Mailing Address PO Box 343

City Murrysville State PA Zip Code 15668

Purpose of Disbursement  
Eli Evankovich, STATE HOUSE 54th PA

011

Candidate Name  
**PA Rep. Eli Evankovich**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 7 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 38066823**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 3 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Eli Evankovich, STATE HOUSE 54th PA

Full Name (Last, First, Middle Initial)

**C. Friends of Bryan Cutler**

Mailing Address PO Box 624

City Quarryville State PA Zip Code 17566

Purpose of Disbursement  
Bryan Cutler, STATE HOUSE 100th PA

011

Candidate Name  
**PA Rep. Bryan Cutler**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 7 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 38066824**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

Bryan Cutler, STATE HOUSE 100th PA

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

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

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

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Citizens for Browne**

Mailing Address 1111 N. 11th Street

City Whitehall State PA Zip Code 18052

Purpose of Disbursement  
Patrick Browne, STATE SENATE 16th PA

011

Candidate Name  
**PA Sen. Patrick Browne**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2015

**Transaction ID : 38066825**

Amount of Each Disbursement this Period

1000.00

Patrick Browne, STATE SENATE 16th PA

Full Name (Last, First, Middle Initial)

**B. House Republican Campaign Committee**

Mailing Address PO Box 11787

City Harrisburg State PA Zip Code 17108

Purpose of Disbursement  
Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2015

**Transaction ID : 38066826**

Amount of Each Disbursement this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Bob Krist for Legislature**

Mailing Address 7365 N 122nd Avenue Circle

City Omaha State NE Zip Code 68142

Purpose of Disbursement  
Bob Krist, STATE SENATE 10th NE

011

Candidate Name  
**NE Sen. Bob Krist**

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2015

**Transaction ID : 38067063**

Amount of Each Disbursement this Period

400.00

Bob Krist, STATE SENATE 10th NE

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

2400.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Hogsett for Indianapolis**

Mailing Address 133 W. Market Street, #190

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement  
Joe Hogsett, Mayor-Indianapolis IN

Candidate Name  
**Joe Hogsett**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 38069807**

Amount of Each Disbursement this Period

Joe Hogsett, Mayor-Indianapolis IN

Full Name (Last, First, Middle Initial)

**B. Indiana Democratic Party**

Mailing Address One North Capital Avenue

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 38069809**

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

**C. Friends of Phil Bryant**

Mailing Address PO Box 321226

City Flowood State MS Zip Code 39232

Purpose of Disbursement  
Phil Bryant, GOVERNOR MS

Candidate Name

**Phil Bryant**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**011**  
Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 38112030**

Amount of Each Disbursement this Period

Phil Bryant, GOVERNOR MS

**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**

Full Name (Last, First, Middle Initial)

**A. Phillip Gunn Campaign Committee**

Mailing Address PO Box 1159

City State Zip Code  
Clinton MS 39060

Purpose of Disbursement  
Philip Gunn, STATE HOUSE 56th MS

Candidate Name  
**MS Rep. Philip Gunn**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : 38112032**

Amount of Each Disbursement this Period

Philip Gunn, STATE HOUSE 56th MS

Full Name (Last, First, Middle Initial)

**B. Friends for Donna Oberlander**

Mailing Address 44 W. Main Street

City State Zip Code  
Clarion PA 16214

Purpose of Disbursement  
Donna Oberlander, STATE HOUSE 63rd PA

Candidate Name  
**PA Rep. Donna Oberlander**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : 38112033**

Amount of Each Disbursement this Period

Donna Oberlander, STATE HOUSE 63rd PA

Full Name (Last, First, Middle Initial)

**C. Friends of Dave Reed**

Mailing Address 185 W. Ranson Avenue

City State Zip Code  
Blairsville PA 15717

Purpose of Disbursement  
Dave Reed, STATE HOUSE 62nd PA

Candidate Name  
**PA Rep. Dave Reed**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

/  /

**Transaction ID : 38112034**

Amount of Each Disbursement this Period

Dave Reed, STATE HOUSE 62nd PA

**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)

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

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

Full Name (Last, First, Middle Initial)

**A. Friends of Jake Corman**

Mailing Address PO Box 421

City Bellefonte State PA Zip Code 16823

Purpose of Disbursement  
Jake Corman, STATE SENATE 34th PA

Candidate Name  
**Jake Corman**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

011  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 24 / 2015

**Transaction ID : 38112035**

Amount of Each Disbursement this Period

2000.00

Jake Corman, STATE SENATE 34th PA

Full Name (Last, First, Middle Initial)

**B. LaRuby May 2015**

Mailing Address 3211 Martin Luther King Jr. Avenue

City Washington State DC Zip Code 20032

Purpose of Disbursement  
LaRuby May, COUNCIL WARD 8th DC

Candidate Name  
**LaRuby May**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

011  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 24 / 2015

**Transaction ID : 38112036**

Amount of Each Disbursement this Period

500.00

LaRuby May, COUNCIL WARD 8th DC

Full Name (Last, First, Middle Initial)

**C. Friends of Tate Reeves**

Mailing Address PO Box 24335

City Jackson State MS Zip Code 39225

Purpose of Disbursement  
Tate Reeves, LT. GOVERNOR MS

Candidate Name  
**Tate Reeves**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

011  
Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 29 / 2015

**Transaction ID : 38133085**

Amount of Each Disbursement this Period

1000.00

Tate Reeves, LT. GOVERNOR MS

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

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

3500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Commonwealth Leaders Cup**

Mailing Address 417 Walnut St

City Harrisburg State PA Zip Code 17101

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement  
 /  /

**Transaction ID : 38133096**

Amount of Each Disbursement this Period

Contribution

Full Name (Last, First, Middle Initial)

**B. Friends of Marguerite Quinn**

Mailing Address PO Box 58

City Doylestown State PA Zip Code 18901

Purpose of Disbursement  
Marguerite Quinn, STATE HOUSE 143rd PA

Candidate Name

**PA Rep. Marguerite Quinn**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement  
 /  /

**Transaction ID : 38133097**

Amount of Each Disbursement this Period

Marguerite Quinn, STATE HOUSE 143rd PA

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement  
 /  /

Amount of Each Disbursement this Period

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

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