

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
GlaxoSmithKline LLC PAC (GSK PAC)

ADDRESS (number and street) Five Moore Drive P.O. Box 13358  
 Check if different than previously reported. (ACC)  
Research Triangle NC 27709

2. **FEC IDENTIFICATION NUMBER** C00199703  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 04 01 2010 through 04 30 2010

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 David Miller

Signature of Treasurer Electronically Filed by David Miller Date 05 19 2010

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

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

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
GlaxoSmithKline LLC PAC (GSK PAC)

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		139189.11
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	174335.73									
(c) Total Receipts (from Line 19) .....	93183.22	282961.92								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	267518.95	422151.03								
7. Total Disbursements (from Line 31) .....	91519.20	246151.28								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	175999.75	175999.75								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
GlaxoSmithKline LLC PAC (GSK PAC)

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	15413.32	21351.46
(ii) Unitemized .....	77769.90	261594.49
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	93183.22	282945.95
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	15.97
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	93183.22	282961.92
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	93183.22	282961.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	93183.22	282961.92

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	19.20	3634.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	19.20	3634.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	34000.00	178500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	17.00
(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	17.00
29. Other Disbursements.....	57500.00	64000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	91519.20	246151.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	91519.20	246151.28

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 171

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	93183.22	282961.92
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	17.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	93183.22	282944.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19.20	3634.28
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	19.20	3634.28

# 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 6 / 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Andrew P Baer		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-936318
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		22.33	
Name of Employer GlaxoSmithKline LLC		Occupation Regional Trainer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.97		

<b>B.</b>	Full Name (Last, First, Middle Initial) John E Bailey, Jr.		Date of Receipt	
	Mailing Address Five Moore Drive		M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-938212
	Research Triange	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		277.78	
Name of Employer GlaxoSmithKline LLC		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 277.78		

<b>C.</b>	Full Name (Last, First, Middle Initial) Patricia L Baker		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-935215
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		23.98	
Name of Employer GlaxoSmithKline LLC		Occupation HIV Sr Exec Clinical Spec II		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 215.82		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	324.09
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

A. Form/Schedule : **SA11AI**

Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
John M Baldoni

Mailing Address 709 Swedeland Rd.

City State Zip Code  
King of Prussia PA 19406

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

Name of Employer Occupation  
GlaxoSmithKline LLC Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-768706

Amount of Each Receipt this Period  
40.00

**B.**

Full Name (Last, First, Middle Initial)  
John M Baldoni

Mailing Address 709 Swedeland Rd.

City State Zip Code  
King of Prussia PA 19406

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

Name of Employer Occupation  
GlaxoSmithKline LLC Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-891080

Amount of Each Receipt this Period  
40.00

**C.**

Full Name (Last, First, Middle Initial)  
John M Baldoni

Mailing Address 709 Swedeland Rd.

City State Zip Code  
King of Prussia PA 19406

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

Name of Employer Occupation  
GlaxoSmithKline LLC Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-937438

Amount of Each Receipt this Period  
40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **120.00**

**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: PAGE 9 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Richard J Barbato

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Regional VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
267.96

Date of Receipt: 04 / 02 / 2010  
**Transaction ID: A2010-767985**

Amount of Each Receipt this Period  
38.28

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Richard J Barbato

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Regional VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
306.24

Date of Receipt: 04 / 16 / 2010  
**Transaction ID: A2010-890361**

Amount of Each Receipt this Period  
38.28

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Richard J Barbato

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Regional VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
344.52

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: A2010-936722**

Amount of Each Receipt this Period  
38.28

**SUBTOTAL** of Receipts This Page (optional) ..... ► **114.84**

**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 10 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Phillip J Barca

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 209.44

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-890219

Amount of Each Receipt this Period

26.18

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Phillip J Barca

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 235.62

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-936581

Amount of Each Receipt this Period

26.18

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey L Barnes

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Market Development Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.35

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

Transaction ID: A2010-768365

Amount of Each Receipt this Period

25.35

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

77.71

**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 11 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey L Barnes

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Market Development Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 245.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Transaction ID: A2010-890739

Amount of Each Receipt this Period

25.35
-------

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey L Barnes

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Market Development Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 271.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Transaction ID: A2010-937098

Amount of Each Receipt this Period

25.35
-------

**C.**

Full Name (Last, First, Middle Initial)  
Sandra E Benen

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Acct Mgr HIV

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 202.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	1	0

Transaction ID: A2010-767504

Amount of Each Receipt this Period

28.95
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**SUBTOTAL** of Receipts This Page (optional) .....

79.65
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**TOTAL** This Period (last page this line number only) .....

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 171  
(check only one)

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

**A.**

Full Name (Last, First, Middle Initial)  
Sandra E Benen

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Acct Mgr HIV

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 231.60

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-889882

Amount of Each Receipt this Period  
28.95

**B.**

Full Name (Last, First, Middle Initial)  
Sandra E Benen

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Acct Mgr HIV

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.55

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-936244

Amount of Each Receipt this Period  
28.95

**C.**

Full Name (Last, First, Middle Initial)  
Mr. David L Benson

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir CNS/Metabolic IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 209.72

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-767139

Amount of Each Receipt this Period  
29.96

**SUBTOTAL** of Receipts This Page (optional) ..... ► **87.86**

**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 13 / 171
	<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. David L Benson

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir CNS/Metabolic IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 239.68

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

**Transaction ID:** A2010-889519

Amount of Each Receipt this Period  
29.96

**B.**

Full Name (Last, First, Middle Initial)  
Mr. David L Benson

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir CNS/Metabolic IT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 269.64

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-935882

Amount of Each Receipt this Period  
29.96

**C.**

Full Name (Last, First, Middle Initial)  
Marian Benz

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Account Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.99

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

**Transaction ID:** A2010-768013

Amount of Each Receipt this Period  
29.57

**SUBTOTAL** of Receipts This Page (optional) ..... ► 89.49

**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 14 / 171

(check only one)

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

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Marian Benz

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Account Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 236.56

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-890389

Amount of Each Receipt this Period

29.57

**B.**

Full Name (Last, First, Middle Initial)  
Marian Benz

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Account Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 266.13

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-936750

Amount of Each Receipt this Period

29.57

**C.**

Full Name (Last, First, Middle Initial)  
Linda A Bickell

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Regional Analyst

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 208.44

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-934827

Amount of Each Receipt this Period

23.16

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

82.30

**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 15 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Christian A Bigsby

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Real EstateAmericas&Pacif

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 363.19

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

**Transaction ID:** A2010-767984

Amount of Each Receipt this Period  
45.19

**B.**

Full Name (Last, First, Middle Initial)  
Christian A Bigsby

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Real EstateAmericas&Pacif

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 408.38

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

**Transaction ID:** A2010-890360

Amount of Each Receipt this Period  
45.19

**C.**

Full Name (Last, First, Middle Initial)  
Christian A Bigsby

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Real EstateAmericas&Pacif

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 453.57

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-936721

Amount of Each Receipt this Period  
45.19

**SUBTOTAL** of Receipts This Page (optional) ..... ► **135.57**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Frank Bilotta

Mailing Address 630 Park Ave.

City State Zip Code  
King of Prussia PA 19406

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

Name of Employer Occupation  
GlaxoSmithKline LLC Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.92

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-765939

Amount of Each Receipt this Period  
41.56

**B.**

Full Name (Last, First, Middle Initial)  
Frank Bilotta

Mailing Address 630 Park Ave.

City State Zip Code  
King of Prussia PA 19406

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

Name of Employer Occupation  
GlaxoSmithKline LLC Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 332.48

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-888324

Amount of Each Receipt this Period  
41.56

**C.**

Full Name (Last, First, Middle Initial)  
Frank Bilotta

Mailing Address 630 Park Ave.

City State Zip Code  
King of Prussia PA 19406

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

Name of Employer Occupation  
GlaxoSmithKline LLC Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 374.04

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-934693

Amount of Each Receipt this Period  
41.56

**SUBTOTAL** of Receipts This Page (optional) ..... ► **124.68**

**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 17 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Sandra J Birkhead

Mailing Address 1011 N. Arendell Ave.

City State Zip Code  
Zebulon NC 27597

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Strategic Proj Logistics

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.86

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

Transaction ID: A2010-768568

Amount of Each Receipt this Period

32.98

**B.**

Full Name (Last, First, Middle Initial)  
Sandra J Birkhead

Mailing Address 1011 N. Arendell Ave.

City State Zip Code  
Zebulon NC 27597

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Strategic Proj Logistics

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 263.84

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-890942

Amount of Each Receipt this Period

32.98

**C.**

Full Name (Last, First, Middle Initial)  
Sandra J Birkhead

Mailing Address 1011 N. Arendell Ave.

City State Zip Code  
Zebulon NC 27597

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Strategic Proj Logistics

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 296.82

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-937299

Amount of Each Receipt this Period

32.98

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

98.94

**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: PAGE 18 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
John P Blake

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir GMS IT NA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 228.27

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

**Transaction ID:** A2010-768100

Amount of Each Receipt this Period  
32.61

**B.**

Full Name (Last, First, Middle Initial)  
John P Blake

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir GMS IT NA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.88

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

**Transaction ID:** A2010-890476

Amount of Each Receipt this Period  
32.61

**C.**

Full Name (Last, First, Middle Initial)  
John P Blake

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir GMS IT NA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 293.49

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-936837

Amount of Each Receipt this Period  
32.61

**SUBTOTAL** of Receipts This Page (optional) ..... ► **97.83**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Thomas M Boone

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 202.80

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-889008

Amount of Each Receipt this Period

25.35

**B.**

Full Name (Last, First, Middle Initial)  
Thomas M Boone

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 228.15

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-935372

Amount of Each Receipt this Period

25.35

**C.**

Full Name (Last, First, Middle Initial)  
Dawn L Brehm

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Regional VP

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 293.86

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

Transaction ID: A2010-767739

Amount of Each Receipt this Period

41.98

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

92.68

**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 20 / 171

(check only one)

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

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Dawn L Brehm		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-890116		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 41.98	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Regional VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.84			

<b>B.</b>	Full Name (Last, First, Middle Initial) Dawn L Brehm		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-936478		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 41.98	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Regional VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 377.82			

<b>C.</b>	Full Name (Last, First, Middle Initial) Brian M Breslin		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 200 N. 16th Street		<b>Transaction ID:</b> A2010-891011		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 26.81	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 214.48			

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

110.77

**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 21 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Brian M Breslin		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 200 N. 16th Street		<b>Transaction ID:</b> A2010-937369		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 26.81	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 241.29			

<b>B.</b>	Full Name (Last, First, Middle Initial) Casey L Broadwell		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-936024		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 23.35	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer GlaxoSmithKline LLC	Occupation Pharma Sr Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.15			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Gary W Browning		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-889860		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 26.10	
	FEC ID number of contributing federal political committee. <b>C</b>				
	Name of Employer GlaxoSmithKline LLC	Occupation Sr District Sales Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 208.80			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	76.26
<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 22 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gary W Browning

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 234.90

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-936222

Amount of Each Receipt this Period  
26.10

**B.** Full Name (Last, First, Middle Initial)  
Erica M Brumleve

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Account Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 214.56

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-889299

Amount of Each Receipt this Period  
26.82

**C.** Full Name (Last, First, Middle Initial)  
Erica M Brumleve

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Account Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 241.38

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935662

Amount of Each Receipt this Period  
26.82

**SUBTOTAL** of Receipts This Page (optional) ..... ► 79.74

**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: PAGE 23 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Jan L Burrus

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Exec Acct Mgr Govt Affrs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 214.13

Date of Receipt: 04 / 02 / 2010  
**Transaction ID: A2010-768579**  
Amount of Each Receipt this Period: 30.59

**B.**

Full Name (Last, First, Middle Initial)  
Jan L Burrus

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Exec Acct Mgr Govt Affrs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244.72

Date of Receipt: 04 / 16 / 2010  
**Transaction ID: A2010-890953**  
Amount of Each Receipt this Period: 30.59

**C.**

Full Name (Last, First, Middle Initial)  
Jan L Burrus

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Exec Acct Mgr Govt Affrs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.31

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: A2010-937310**  
Amount of Each Receipt this Period: 30.59

**SUBTOTAL** of Receipts This Page (optional) ..... ► 91.77

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

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

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

FOR LINE NUMBER: PAGE 24 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. P. J Calico

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 213.93

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935344

Amount of Each Receipt this Period  
23.77

**B.** Full Name (Last, First, Middle Initial)  
James M Campolongo

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Area/Segment VP-A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 470.66

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-767653

Amount of Each Receipt this Period  
72.41

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

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Area/Segment VP-A

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 543.07

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-890030

Amount of Each Receipt this Period  
72.41

**SUBTOTAL** of Receipts This Page (optional) ..... ► 168.59

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
James M Campolongo

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Area/Segment VP-A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
615.48

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-936392

Amount of Each Receipt this Period  
72.41

**B.**

Full Name (Last, First, Middle Initial)  
Mr. George T Carlson

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: District Sales Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
214.74

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-934964

Amount of Each Receipt this Period  
23.86

**C.**

Full Name (Last, First, Middle Initial)  
Adrianna L Carter

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: VP US Legal Ops Bus Reg

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
326.55

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-766989

Amount of Each Receipt this Period  
46.65

**SUBTOTAL** of Receipts This Page (optional) ..... ► **142.92**

**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 26 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Adrianna L Carter		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-889369		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 46.65	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation VP US Legal Ops Bus Reg			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 373.20			

<b>B.</b>	Full Name (Last, First, Middle Initial) Adrianna L Carter		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-935732		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 46.65	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation VP US Legal Ops Bus Reg			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 419.85			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. John S Cheppo		Date of Receipt MM / DD / YYYY 04 / 02 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-767753		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 30.31	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation State Contracting Bus Dev Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 212.17			

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

123.61

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Thomas C Cionci

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: NH-Regional Trainer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 209.70

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-936493  
Amount of Each Receipt this Period: 23.30

**B.**

Full Name (Last, First, Middle Initial)  
Catherine K Clark

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Dir Therapeu Area Cedd

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 04 / 02 / 2010  
Transaction ID: A2010-767737  
Amount of Each Receipt this Period: 30.00

**C.**

Full Name (Last, First, Middle Initial)  
Catherine K Clark

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Dir Therapeu Area Cedd

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 04 / 16 / 2010  
Transaction ID: A2010-890114  
Amount of Each Receipt this Period: 30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 83.30

**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 28 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Catherine K Clark

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Dir Therapeu Area Cedd

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 04 / 30 / 2010

Transaction ID: A2010-936476

Amount of Each Receipt this Period: 30.00

**B.**

Full Name (Last, First, Middle Initial)  
John M Clark

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.52

Date of Receipt: 04 / 16 / 2010

Transaction ID: A2010-888206

Amount of Each Receipt this Period: 25.19

**C.**

Full Name (Last, First, Middle Initial)  
John M Clark

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.71

Date of Receipt: 04 / 30 / 2010

Transaction ID: A2010-934577

Amount of Each Receipt this Period: 25.19

**SUBTOTAL** of Receipts This Page (optional) ..... ► **80.38**

**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 29 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Jeffrey E Collins

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr District Sales Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
227.08

Date of Receipt: 04 / 02 / 2010  
Transaction ID: A2010-768593  
Amount of Each Receipt this Period: 32.44

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Jeffrey E Collins

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr District Sales Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
259.52

Date of Receipt: 04 / 16 / 2010  
Transaction ID: A2010-890967  
Amount of Each Receipt this Period: 32.44

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Jeffrey E Collins

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr District Sales Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
291.96

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-937324  
Amount of Each Receipt this Period: 32.44

**SUBTOTAL** of Receipts This Page (optional) ..... ► **97.32**

**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: PAGE 30 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Kathleen C Conlin		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-935329		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 24.25	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 218.25			

<b>B.</b>	Full Name (Last, First, Middle Initial) Christopher E Conner		Date of Receipt MM / DD / YYYY 04 / 02 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-767741		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 29.05	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Dir Vaccine & Onc Training			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 203.35			

<b>C.</b>	Full Name (Last, First, Middle Initial) Christopher E Conner		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-890118		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 29.05	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Dir Vaccine & Onc Training			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 232.40			

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

82.35

**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 31 / 171

(check only one)

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

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Christopher E Conner		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-936480		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 29.05	
	FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date 261.45		
Name of Employer GlaxoSmithKline LLC		Occupation Dir Vaccine & Onc Training			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Arnold V Cooper		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 200 N. 16th Street		<b>Transaction ID:</b> A2010-936489		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 23.33	
	FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date 209.97		
Name of Employer GlaxoSmithKline LLC		Occupation Sr Exec Therapeutic Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Martha A Corder		Date of Receipt MM / DD / YYYY 04 / 02 / 2010		
	Mailing Address 200 N. 16th Street		<b>Transaction ID:</b> A2010-766018		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 33.35	
	FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date 233.45		
Name of Employer GlaxoSmithKline LLC		Occupation Sr Product Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

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

85.73

**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 32 / 171  
(check only one)

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

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Martha A Corder

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Product Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.80

Date of Receipt: 04 / 16 / 2010

Transaction ID: A2010-888403

Amount of Each Receipt this Period: 33.35

**B.**

Full Name (Last, First, Middle Initial)  
Martha A Corder

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Product Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.15

Date of Receipt: 04 / 30 / 2010

Transaction ID: A2010-934771

Amount of Each Receipt this Period: 33.35

**C.**

Full Name (Last, First, Middle Initial)  
W. Edward Crotty

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 204.21

Date of Receipt: 04 / 30 / 2010

Transaction ID: A2010-935900

Amount of Each Receipt this Period: 22.69

**SUBTOTAL** of Receipts This Page (optional) ..... ► 89.39

**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 33 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bryan Crow

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Sr Exec Therapeutic Specialist

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 214.47

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: A2010-937465**  
 Amount of Each Receipt this Period: 23.83

**B.** Full Name (Last, First, Middle Initial)  
Thomas A Davies

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Sr District Sales Mgr

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 217.04

Date of Receipt: 04 / 16 / 2010  
**Transaction ID: A2010-890583**  
 Amount of Each Receipt this Period: 27.13

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

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Sr District Sales Mgr

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244.17

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: A2010-936944**  
 Amount of Each Receipt this Period: 27.13

**SUBTOTAL** of Receipts This Page (optional) ..... ► 78.09

**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 34 / 171

(check only one)

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

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Timothy W Dean		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-889073
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.35	
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 202.80		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Timothy W Dean		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-935437
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		25.35	
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 228.15		

<b>C.</b>	Full Name (Last, First, Middle Initial) John F DelGiorno		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-766987
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		200.00	
Name of Employer GlaxoSmithKline LLC		Occupation VP Prof & State Govt Affairs		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.99		

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

250.70

**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: PAGE 35 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
John F DelGiorno

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP Prof & State Govt Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1450.99

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-889367

Amount of Each Receipt this Period  
200.00

**B.**

Full Name (Last, First, Middle Initial)  
John F DelGiorno

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP Prof & State Govt Affairs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1650.99

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935730

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. John D Della Valle

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Account Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.32

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-890013

Amount of Each Receipt this Period  
28.29

**SUBTOTAL** of Receipts This Page (optional) ..... ► **428.29**

**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 36 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. John D Della Valle

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Account Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 254.61

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-936375

Amount of Each Receipt this Period

28.29

**B.**

Full Name (Last, First, Middle Initial)  
Philip K Della Valle

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.15

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-936374

Amount of Each Receipt this Period

23.35

**C.**

Full Name (Last, First, Middle Initial)  
Mr. John J Dimaggio

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Market Development Dir

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 215.32

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

Transaction ID: A2010-766576

Amount of Each Receipt this Period

30.76

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

82.40

**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 37 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)

Mr. John J Dimaggio

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Market Development Dir

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 246.08

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-888958

Amount of Each Receipt this Period

30.76

**B.**

Full Name (Last, First, Middle Initial)

Mr. John J Dimaggio

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Market Development Dir

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 276.84

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-935323

Amount of Each Receipt this Period

30.76

**C.**

Full Name (Last, First, Middle Initial)

Duane Dorscheid

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 209.86

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

Transaction ID: A2010-768656

Amount of Each Receipt this Period

29.98

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

91.50

**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 38 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Duane Dorscheid		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-891030		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 29.98	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 239.84			

<b>B.</b>	Full Name (Last, First, Middle Initial) Duane Dorscheid		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-937388		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 29.98	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 269.82			

<b>C.</b>	Full Name (Last, First, Middle Initial) Douglas Dotzman		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 200 N. 16th Street		<b>Transaction ID:</b> A2010-891015		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 27.85	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Therapeutic Spec Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 222.80			

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

87.81

**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 39 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Douglas Dotzman

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Therapeutic Spec Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Transaction ID: A2010-937373

Amount of Each Receipt this Period

27.85
-------

**B.**

Full Name (Last, First, Middle Initial)  
Vicki L Dow

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Regional Analyst

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 212.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Transaction ID: A2010-934773

Amount of Each Receipt this Period

23.59
-------

**C.**

Full Name (Last, First, Middle Initial)  
Edward J Drea

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 217.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Transaction ID: A2010-889281

Amount of Each Receipt this Period

27.23
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**SUBTOTAL** of Receipts This Page (optional) ..... ▶

78.67

**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 / 171
	<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Edward J Drea	Date of Receipt MM / DD / YYYY 04 / 30 / 2010
	Mailing Address 200 N. 16th Street	<b>Transaction ID:</b> A2010-935644
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 27.23
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: GlaxoSmithKline LLC Occupation: Sr Market Development Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.07	

<b>B.</b>	Full Name (Last, First, Middle Initial) Stacy A Duren	Date of Receipt MM / DD / YYYY 04 / 16 / 2010
	Mailing Address 5 Moore Drive	<b>Transaction ID:</b> A2010-889677
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 27.33
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: GlaxoSmithKline LLC Occupation: Product Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 218.64	

<b>C.</b>	Full Name (Last, First, Middle Initial) Stacy A Duren	Date of Receipt MM / DD / YYYY 04 / 30 / 2010
	Mailing Address 5 Moore Drive	<b>Transaction ID:</b> A2010-936040
	City Research Triangle State NC Zip Code 27709	Amount of Each Receipt this Period 27.33
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: GlaxoSmithKline LLC Occupation: Product Mgr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 245.97	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>81.89</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 41 / 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Jeffrey A Elder		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 4 / 1 6 / 2 0 1 0
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2010-889288
		Amount of Each Receipt this Period	
		<input type="text"/> 25.17	
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 201.36	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Jeffrey A Elder		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 4 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2010-935651
		Amount of Each Receipt this Period	
		<input type="text"/> 25.17	
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 226.53	

<b>C.</b>	Full Name (Last, First, Middle Initial) Christopher K Evans		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 4 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee.		Transaction ID: A2010-937060
		Amount of Each Receipt this Period	
		<input type="text"/> 23.24	
Name of Employer GlaxoSmithKline LLC		Occupation Neurohlth Sr Exec Clin Spec II	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 209.16	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 73.58
<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 42 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Maribeth Evens

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-936976

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Heather R Fariss Crouch

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Reg Med Sci II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.90

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-767516

Amount of Each Receipt this Period  
28.70

**C.**

Full Name (Last, First, Middle Initial)  
Heather R Fariss Crouch

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Reg Med Sci II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 229.60

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-889894

Amount of Each Receipt this Period  
28.70

**SUBTOTAL** of Receipts This Page (optional) ..... ► **82.40**

**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 43 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Heather R Fariss Crouch

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Reg Med Sci II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 258.30

Date of Receipt: 04 / 30 / 2010

**Transaction ID:** A2010-936256

Amount of Each Receipt this Period: 28.70

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

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 202.80

Date of Receipt: 04 / 16 / 2010

**Transaction ID:** A2010-888869

Amount of Each Receipt this Period: 25.35

**C.** Full Name (Last, First, Middle Initial)  
Mr. Joseph J Ferrer

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 228.15

Date of Receipt: 04 / 30 / 2010

**Transaction ID:** A2010-935234

Amount of Each Receipt this Period: 25.35

**SUBTOTAL** of Receipts This Page (optional) ..... ► 79.40

**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 44 / 171

(check only one)

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

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)

Mark P Fisher

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 205.44

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-890796

Amount of Each Receipt this Period

25.68

**B.**

Full Name (Last, First, Middle Initial)

Mark P Fisher

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 231.12

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-937155

Amount of Each Receipt this Period

25.68

**C.**

Full Name (Last, First, Middle Initial)

Mr. John S Forrest

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Account Director

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 221.27

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

Transaction ID: A2010-766770

Amount of Each Receipt this Period

31.61

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

82.97

**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 45 / 171
	<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	

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. John S Forrest		Date of Receipt																					
	Mailing Address 5 Moore Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		1	6		2	0	1	0														
	City State Zip Code Research Triangle NC 27709		<b>Transaction ID:</b> A2010-889150																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer: GlaxoSmithKline LLC Occupation: Account Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 252.88		<table border="1"> <tr> <td colspan="10">31.61</td> </tr> </table>		31.61																				
31.61																								

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. John S Forrest		Date of Receipt																					
	Mailing Address 5 Moore Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		3	0		2	0	1	0														
	City State Zip Code Research Triangle NC 27709		<b>Transaction ID:</b> A2010-935514																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer: GlaxoSmithKline LLC Occupation: Account Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 284.49		<table border="1"> <tr> <td colspan="10">31.61</td> </tr> </table>		31.61																				
31.61																								

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Steven W Fox		Date of Receipt																					
	Mailing Address 5 Moore Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	2		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		0	2		2	0	1	0														
	City State Zip Code Research Triangle NC 27709		<b>Transaction ID:</b> A2010-767043																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 257.25		<table border="1"> <tr> <td colspan="10">36.75</td> </tr> </table>		36.75																				
36.75																								

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	<table border="1"><tr><td>99.97</td></tr></table>	99.97
99.97			
<b>TOTAL</b> This Period (last page this line number only) .....	▶	<table border="1"><tr><td> </td></tr></table>	

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

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

FOR LINE NUMBER: PAGE 46 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steven W Fox

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Regional VP

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 294.00

Date of Receipt: 04 / 16 / 2010  
**Transaction ID: A2010-889423**  
 Amount of Each Receipt this Period: 36.75

**B.** Full Name (Last, First, Middle Initial)  
Mr. Steven W Fox

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Regional VP

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.75

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: A2010-935786**  
 Amount of Each Receipt this Period: 36.75

**C.** Full Name (Last, First, Middle Initial)  
Donald R Frailey, Jr.

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Sr Reg Med Sci II

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 211.12

Date of Receipt: 04 / 16 / 2010  
**Transaction ID: A2010-889385**  
 Amount of Each Receipt this Period: 26.39

**SUBTOTAL** of Receipts This Page (optional) ..... ► 99.89

**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 47 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Donald R Frailey, Jr.  
Mailing Address 200 N. 16th Street  
City Philadelphia State PA Zip Code 19102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation Sr Reg Med Sci II  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 237.51  
Date of Receipt 04 / 30 / 2010  
Transaction ID: A2010-935748  
Amount of Each Receipt this Period 26.39

**B.** Full Name (Last, First, Middle Initial)  
Paul J Fraioli  
Mailing Address 1500 Littleton Rd.  
City Parsippany State NJ Zip Code 07054  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation VPEnt Brands Fut Team & MLP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 364.00  
Date of Receipt 04 / 02 / 2010  
Transaction ID: A2010-768047  
Amount of Each Receipt this Period 52.00

**C.** Full Name (Last, First, Middle Initial)  
Paul J Fraioli  
Mailing Address 1500 Littleton Rd.  
City Parsippany State NJ Zip Code 07054  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation VPEnt Brands Fut Team & MLP  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 416.00  
Date of Receipt 04 / 16 / 2010  
Transaction ID: A2010-890423  
Amount of Each Receipt this Period 52.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 130.39  
**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 48 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Paul J Fraioli

Mailing Address 1500 Littleton Rd.

City Parsippany State NJ Zip Code 07054

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: VPEnt Brands Fut Team & MLP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-936784  
Amount of Each Receipt this Period: 52.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Joseph E Gauzens

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr District Sales Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 224.64

Date of Receipt: 04 / 16 / 2010  
Transaction ID: A2010-890980  
Amount of Each Receipt this Period: 28.08

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Joseph E Gauzens

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr District Sales Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 252.72

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-937337  
Amount of Each Receipt this Period: 28.08

**SUBTOTAL** of Receipts This Page (optional) ..... ► 108.16

**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: PAGE 49 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Betsy T Gillen  
Mailing Address 5 Moore Drive  
City State Zip Code  
Research Triangle NC 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
GlaxoSmithKline LLC Sales Training Mgr  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 216.18  
Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-937276  
Amount of Each Receipt this Period: 24.02

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mark A Glasser  
Mailing Address 5 Moore Drive  
City State Zip Code  
Research Triangle NC 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
GlaxoSmithKline LLC District Sales Mgr  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 205.52  
Date of Receipt: 04 / 16 / 2010  
Transaction ID: A2010-888911  
Amount of Each Receipt this Period: 25.69

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark A Glasser  
Mailing Address 5 Moore Drive  
City State Zip Code  
Research Triangle NC 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
GlaxoSmithKline LLC District Sales Mgr  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 231.21  
Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-935276  
Amount of Each Receipt this Period: 25.69

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 75.40  
**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 50 / 171
	<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Crystal Glenn		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-936344
Name of Employer GlaxoSmithKline LLC		Occupation District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 23.54
		<input type="text"/> 211.86	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Michael A Gloyd		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-889144
Name of Employer GlaxoSmithKline LLC		Occupation Exec Account Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 28.48
		<input type="text"/> 227.84	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Michael A Gloyd		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-935508
Name of Employer GlaxoSmithKline LLC		Occupation Exec Account Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 28.48
		<input type="text"/> 256.32	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 80.50
<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 51 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ronald L Goldberg

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Sr Exec Therapeutic Spec II

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.50

Date of Receipt: 04 / 30 / 2010  
**Transaction ID:** A2010-936700  
 Amount of Each Receipt this Period: 22.50

**B.** Full Name (Last, First, Middle Initial)  
Peter D Gorycki

Mailing Address 709 Swedeland Rd.

City State Zip Code  
King of Prussia PA 19406

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Section Mgr DMPK

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.70

Date of Receipt: 04 / 02 / 2010  
**Transaction ID:** A2010-768054  
 Amount of Each Receipt this Period: 30.10

**C.** Full Name (Last, First, Middle Initial)  
Peter D Gorycki

Mailing Address 709 Swedeland Rd.

City State Zip Code  
King of Prussia PA 19406

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Section Mgr DMPK

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.80

Date of Receipt: 04 / 16 / 2010  
**Transaction ID:** A2010-890430  
 Amount of Each Receipt this Period: 30.10

**SUBTOTAL** of Receipts This Page (optional) ..... ► **82.70**

**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 52 / 171
	<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Peter D Gorycki		Date of Receipt MM / DD / YYYY 04 / 30 / 2010
	Mailing Address 709 Swedeland Rd.		<b>Transaction ID:</b> A2010-936791
	City King of Prussia	State PA	Zip Code 19406
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 30.10
	Name of Employer GlaxoSmithKline LLC	Occupation Section Mgr DMPK	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.90	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. John P Graham		Date of Receipt MM / DD / YYYY 04 / 02 / 2010
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-766975
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.19
	Name of Employer GlaxoSmithKline LLC	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 267.33	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. John P Graham		Date of Receipt MM / DD / YYYY 04 / 16 / 2010
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-889355
	City Research Triangle	State NC	Zip Code 27709
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.19
	Name of Employer GlaxoSmithKline LLC	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 305.52	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	106.48
<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: PAGE 53 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. John P Graham		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-935718		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 38.19	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Regional VP			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 343.71			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Paul C Graml		Date of Receipt MM / DD / YYYY 04 / 02 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-768109		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 60.77	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Exec Acct Mgr SP&AD			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 395.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Paul C Graml		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-890485		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 60.77	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Exec Acct Mgr SP&AD			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 455.77			

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

159.73

**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 54 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)

Mr. Paul C Graml

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Acct Mgr SP&AD

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 516.54

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-936846

Amount of Each Receipt this Period

60.77

**B.**

Full Name (Last, First, Middle Initial)

Mr. Michael A Grillot

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Account Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 216.79

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

Transaction ID: A2010-767213

Amount of Each Receipt this Period

30.97

**C.**

Full Name (Last, First, Middle Initial)

Mr. Michael A Grillot

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Account Director

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 247.76

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-889593

Amount of Each Receipt this Period

30.97

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

122.71

**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 55 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Michael A Grillot

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Account Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 278.73

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-935956

Amount of Each Receipt this Period

30.97

**B.**

Full Name (Last, First, Middle Initial)  
B. S Guthrie

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Account Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.28

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

Transaction ID: A2010-767500

Amount of Each Receipt this Period

30.04

**C.**

Full Name (Last, First, Middle Initial)  
B. S Guthrie

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Account Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.32

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-889878

Amount of Each Receipt this Period

30.04

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

91.05

**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 56 / 171
	<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
B. S Guthrie

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Account Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.36

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-936240  
Amount of Each Receipt this Period: 30.04

**B.** Full Name (Last, First, Middle Initial)  
James R Hagan

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP Env Hlth & Safty

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 388.43

Date of Receipt: 04 / 02 / 2010  
Transaction ID: A2010-767746  
Amount of Each Receipt this Period: 55.49

**C.** Full Name (Last, First, Middle Initial)  
James R Hagan

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP Env Hlth & Safty

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 443.92

Date of Receipt: 04 / 16 / 2010  
Transaction ID: A2010-890123  
Amount of Each Receipt this Period: 55.49

**SUBTOTAL** of Receipts This Page (optional) ..... ► 141.02

**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: PAGE 57 / 171  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
James R Hagan  
Mailing Address 200 N. 16th Street  
City Philadelphia State PA Zip Code 19102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation VP Env Hlth & Safty  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 499.41  
Date of Receipt 04 / 30 / 2010  
Transaction ID: A2010-936485  
Amount of Each Receipt this Period 55.49

**B.** Full Name (Last, First, Middle Initial)  
Karen E Hamby  
Mailing Address 5 Moore Drive  
City Research Triangle State NC Zip Code 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation VP Regional Managed Mkts  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 334.32  
Date of Receipt 04 / 02 / 2010  
Transaction ID: A2010-766211  
Amount of Each Receipt this Period 47.76

**C.** Full Name (Last, First, Middle Initial)  
Karen E Hamby  
Mailing Address 5 Moore Drive  
City Research Triangle State NC Zip Code 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation VP Regional Managed Mkts  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 382.08  
Date of Receipt 04 / 16 / 2010  
Transaction ID: A2010-888595  
Amount of Each Receipt this Period 47.76

**SUBTOTAL** of Receipts This Page (optional) ..... ► 151.01  
**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 58 / 171
	<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Karen E Hamby		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-934961
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		47.76	
Name of Employer GlaxoSmithKline LLC		Occupation VP Regional Managed Mkts		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 429.84		

<b>B.</b>	Full Name (Last, First, Middle Initial) Peter K Hare		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-768916
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		61.30	
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 429.10		

<b>C.</b>	Full Name (Last, First, Middle Initial) Peter K Hare		Date of Receipt	
	Mailing Address 5 Moore Drive		M M / D D / Y Y Y Y Y 0 4 / 1 6 / 2 0 1 0	
	City	State	Zip Code	<b>Transaction ID:</b> A2010-891289
	Research Triangle	NC	27709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		61.30	
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 490.40		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	170.36
<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 59 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Peter K Hare

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: EXECUTIVE

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 551.70

Date of Receipt: 04 / 30 / 2010  
**Transaction ID:** A2010-937645  
 Amount of Each Receipt this Period: 61.30

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

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Sr Mgr HCM Services

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 226.96

Date of Receipt: 04 / 16 / 2010  
**Transaction ID:** A2010-889457  
 Amount of Each Receipt this Period: 28.37

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

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Sr Mgr HCM Services

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.33

Date of Receipt: 04 / 30 / 2010  
**Transaction ID:** A2010-935820  
 Amount of Each Receipt this Period: 28.37

**SUBTOTAL** of Receipts This Page (optional) ..... ► **118.04**

**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 60 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. David M Harp

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Account Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 224.56

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-889469

Amount of Each Receipt this Period  
28.07

**B.** Full Name (Last, First, Middle Initial)  
Mr. David M Harp

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Account Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 252.63

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935832

Amount of Each Receipt this Period  
28.07

**C.** Full Name (Last, First, Middle Initial)  
Linda M Hart

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.05

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-936274

Amount of Each Receipt this Period  
24.45

**SUBTOTAL** of Receipts This Page (optional) ..... ► 80.59

**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 61 / 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Jacob A Hartsfield

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: VP Public Policy & Advocacy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 346.08

Date of Receipt: 04 / 02 / 2010  
**Transaction ID: A2010-767401**  
Amount of Each Receipt this Period: 49.44

**B.** Full Name (Last, First, Middle Initial)  
Jacob A Hartsfield

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: VP Public Policy & Advocacy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 477.66

Date of Receipt: 04 / 16 / 2010  
**Transaction ID: A2010-889781**  
Amount of Each Receipt this Period: 131.58

**C.** Full Name (Last, First, Middle Initial)  
Jacob A Hartsfield

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: VP Public Policy & Advocacy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 609.24

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: A2010-936143**  
Amount of Each Receipt this Period: 131.58

**SUBTOTAL** of Receipts This Page (optional) ..... ► 312.60

**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 62 / 171
	<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	

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Lynn S Harvey

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: District Sales Mgr

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 214.56

Date of Receipt: 04 / 16 / 2010  
**Transaction ID: A2010-889865**  
 Amount of Each Receipt this Period: 26.82

**B.** Full Name (Last, First, Middle Initial)  
Lynn S Harvey

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: District Sales Mgr

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.38

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: A2010-936227**  
 Amount of Each Receipt this Period: 26.82

**C.** Full Name (Last, First, Middle Initial)  
Gary A Heimberg

Mailing Address Five Moore Drive

City State Zip Code  
Res. Triangle Park NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Executive

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.57

Date of Receipt: 04 / 02 / 2010  
**Transaction ID: A2010-769265**  
 Amount of Each Receipt this Period: 33.51

**SUBTOTAL** of Receipts This Page (optional) ..... ► 87.15

**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 63 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Gary A Heimberg

Mailing Address Five Moore Drive

City State Zip Code  
Res. Triangle Park NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 268.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Transaction ID: A2010-891636

Amount of Each Receipt this Period

33.51
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**B.**

Full Name (Last, First, Middle Initial)  
Gary A Heimberg

Mailing Address Five Moore Drive

City State Zip Code  
Res. Triangle Park NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 335.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Transaction ID: A2010-937990

Amount of Each Receipt this Period

67.02
-------

**C.**

Full Name (Last, First, Middle Initial)  
John T Herzog

Mailing Address Five Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 281.90

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	1	0

Transaction ID: A2010-769461

Amount of Each Receipt this Period

43.37
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**SUBTOTAL** of Receipts This Page (optional) .....

143.90
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**TOTAL** This Period (last page this line number only) .....

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 171  
(check only one)

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

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
John T Herzog

Mailing Address Five Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.27

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-891831

Amount of Each Receipt this Period  
43.37

**B.**

Full Name (Last, First, Middle Initial)  
John T Herzog

Mailing Address Five Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 368.64

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-938185

Amount of Each Receipt this Period  
43.37

**C.**

Full Name (Last, First, Middle Initial)  
Thomas K Hess

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Vaccines Reg Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.05

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-765945

Amount of Each Receipt this Period  
32.15

**SUBTOTAL** of Receipts This Page (optional) ..... ► **118.89**

**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 65 / 171  
(check only one)

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

**A.**

Full Name (Last, First, Middle Initial)  
Thomas K Hess

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Vaccines Reg Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 257.20

Date of Receipt: 04 / 16 / 2010

Transaction ID: A2010-888330

Amount of Each Receipt this Period: 32.15

**B.**

Full Name (Last, First, Middle Initial)  
Thomas K Hess

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Vaccines Reg Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 289.35

Date of Receipt: 04 / 30 / 2010

Transaction ID: A2010-934699

Amount of Each Receipt this Period: 32.15

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Jeffrey G Himmelberg

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Acct Mgr SP&AD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 218.48

Date of Receipt: 04 / 16 / 2010

Transaction ID: A2010-888747

Amount of Each Receipt this Period: 27.31

**SUBTOTAL** of Receipts This Page (optional) ..... ► 91.61

**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 66 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Jeffrey G Himmelberg

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr Acct Mgr SP&AD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.79

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	3	0	/	2	0	1	0

**Transaction ID:** A2010-935112

Amount of Each Receipt this Period  
27.31

**B.**

Full Name (Last, First, Middle Initial)  
Barbara M Hoffman

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Mgr Business Dev

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
389.74

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	2	/	2	0	1	0

**Transaction ID:** A2010-767388

Amount of Each Receipt this Period  
59.96

**C.**

Full Name (Last, First, Middle Initial)  
Barbara M Hoffman

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Mgr Business Dev

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
449.70

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	6	/	2	0	1	0

**Transaction ID:** A2010-889768

Amount of Each Receipt this Period  
59.96

**SUBTOTAL** of Receipts This Page (optional) ..... ► **147.23**

**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 67 / 171
	<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	

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Barbara M Hoffman		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 30 / 2010
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-936130
Name of Employer GlaxoSmithKline LLC		Occupation Mgr Business Dev	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 509.66	<input type="text"/> 59.96

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Terence R Hofmann		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 02 / 2010
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-768500
Name of Employer GlaxoSmithKline LLC		Occupation Exec Acct Mgr IHM	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.53	<input type="text"/> 28.79

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Terence R Hofmann		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 16 / 2010
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-890874
Name of Employer GlaxoSmithKline LLC		Occupation Exec Acct Mgr IHM	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.32	<input type="text"/> 28.79

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 117.54
<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 68 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)

Mr. Terence R Hofmann

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Acct Mgr IHM

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 259.11

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-937231

Amount of Each Receipt this Period

28.79

**B.**

Full Name (Last, First, Middle Initial)

Hollie R Hofmeister

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC HIV Sr Exec Clinical Spec II

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 219.87

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-936734

Amount of Each Receipt this Period

24.43

**C.**

Full Name (Last, First, Middle Initial)

Mr. Peter A Holte

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 215.73

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-935174

Amount of Each Receipt this Period

23.97

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

77.19

**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 / 171
	<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Timothy C Hoosier

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: NeuroHealth Sr Exec Clin Spec

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.24

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-935353  
Amount of Each Receipt this Period: 22.36

**B.** Full Name (Last, First, Middle Initial)  
Mr. David D Hoyland

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr District Sales Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 213.48

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-936431  
Amount of Each Receipt this Period: 23.72

**C.** Full Name (Last, First, Middle Initial)  
Mr. Roger C Hudson

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr Exec Therapeutic Specialist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-936185  
Amount of Each Receipt this Period: 23.42

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 69.50

**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 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Peter W Huston

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 218.97

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-936941

Amount of Each Receipt this Period  
24.33

**B.**

Full Name (Last, First, Middle Initial)  
Catherine Jester

Mailing Address 2301 Renaissance Blvd.

City State Zip Code  
King of Prussia PA 19406

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

Name of Employer Occupation  
GlaxoSmithKline LLC Mgr Programming

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 207.90

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-934580

Amount of Each Receipt this Period  
23.10

**C.**

Full Name (Last, First, Middle Initial)  
Kathleen M Kavanaugh

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Acct Mgr HIV

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.61

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-766771

Amount of Each Receipt this Period  
30.23

**SUBTOTAL** of Receipts This Page (optional) ..... ► 77.66

**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 71 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Kathleen M Kavanaugh

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Exec Acct Mgr HIV

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 241.84

Date of Receipt: MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-889151

Amount of Each Receipt this Period: 30.23

**B.**

Full Name (Last, First, Middle Initial)  
Kathleen M Kavanaugh

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Exec Acct Mgr HIV

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 272.07

Date of Receipt: MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935515

Amount of Each Receipt this Period: 30.23

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Thomas E Keeney

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr District Sales Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.80

Date of Receipt: MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-889819

Amount of Each Receipt this Period: 25.35

**SUBTOTAL** of Receipts This Page (optional) ..... ► 85.81

**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 72 / 171  
(check only one)

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Thomas E Keeney

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 228.15

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-936181

Amount of Each Receipt this Period  
25.35

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

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC National Account Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 239.61

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-767494

Amount of Each Receipt this Period  
34.23

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kerry L Kelley

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC National Account Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 273.84

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-889872

Amount of Each Receipt this Period  
34.23

**SUBTOTAL** of Receipts This Page (optional) ..... ► **93.81**

**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 73 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Kerry L Kelley  
 Mailing Address 5 Moore Drive  
 City State Zip Code  
 Research Triangle NC 27709  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 3 0 / 2 0 1 0  
**Transaction ID:** A2010-936234  
 Amount of Each Receipt this Period  
 34.23  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 GlaxoSmithKline LLC National Account Director  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 308.07

**B.** Full Name (Last, First, Middle Initial)  
Mr. James D Kerr  
 Mailing Address 5 Moore Drive  
 City State Zip Code  
 Research Triangle NC 27709  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 0 2 / 2 0 1 0  
**Transaction ID:** A2010-767333  
 Amount of Each Receipt this Period  
 32.88  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 GlaxoSmithKline LLC Dir Business Plng  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 230.16

**C.** Full Name (Last, First, Middle Initial)  
Mr. James D Kerr  
 Mailing Address 5 Moore Drive  
 City State Zip Code  
 Research Triangle NC 27709  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 4 / 1 6 / 2 0 1 0  
**Transaction ID:** A2010-889713  
 Amount of Each Receipt this Period  
 32.88  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 GlaxoSmithKline LLC Dir Business Plng  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 263.04

**SUBTOTAL** of Receipts This Page (optional) ..... ► 99.99  
**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 74 / 171

(check only one)

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

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. James D Kerr		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-936076		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 32.88	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Dir Business Plng			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 295.92			

<b>B.</b>	Full Name (Last, First, Middle Initial) Dean A Klimas		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-936383		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 22.33	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Sr Exec Therapeutic Specialist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.97			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary P Koenecke		Date of Receipt MM / DD / YYYY 04 / 02 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-768307		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 29.16	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Exec Acct Mgr Govt Affrs			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 204.12			

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

84.37

**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 75 / 171  
(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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mary P Koenecke  
Mailing Address 5 Moore Drive  
City State Zip Code  
Research Triangle NC 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 233.28  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0  
Transaction ID: A2010-890681  
Amount of Each Receipt this Period  
29.16

**B.** Full Name (Last, First, Middle Initial)  
Mary P Koenecke  
Mailing Address 5 Moore Drive  
City State Zip Code  
Research Triangle NC 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 262.44  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0  
Transaction ID: A2010-937041  
Amount of Each Receipt this Period  
29.16

**C.** Full Name (Last, First, Middle Initial)  
Mr. Lewis H Krumbein  
Mailing Address 5 Moore Drive  
City State Zip Code  
Research Triangle NC 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
GlaxoSmithKline LLC Exec Acct Mgr IHM  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 213.99  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0  
Transaction ID: A2010-767233  
Amount of Each Receipt this Period  
30.57

**SUBTOTAL** of Receipts This Page (optional) ..... ► 88.89  
**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 / 171  
(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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Lewis H Krumbein  
Mailing Address 5 Moore Drive  
City State Zip Code  
Research Triangle NC 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
GlaxoSmithKline LLC Exec Acct Mgr IHM  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 244.56  
Date of Receipt: 04 / 16 / 2010  
Transaction ID: A2010-889613  
Amount of Each Receipt this Period 30.57

**B.** Full Name (Last, First, Middle Initial)  
Mr. Lewis H Krumbein  
Mailing Address 5 Moore Drive  
City State Zip Code  
Research Triangle NC 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
GlaxoSmithKline LLC Exec Acct Mgr IHM  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.13  
Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-935976  
Amount of Each Receipt this Period 30.57

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gaspar Laca  
Mailing Address 5 Moore Drive  
City State Zip Code  
Research Triangle NC 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
GlaxoSmithKline LLC Account Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 389.68  
Date of Receipt: 04 / 02 / 2010  
Transaction ID: A2010-766466  
Amount of Each Receipt this Period 63.28

**SUBTOTAL** of Receipts This Page (optional) ..... ► 124.42  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Gaspar Laca

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Account Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 452.96

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-888848

Amount of Each Receipt this Period  
63.28

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Gaspar Laca

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Account Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 516.24

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935213

Amount of Each Receipt this Period  
63.28

**C.**

Full Name (Last, First, Middle Initial)  
Thomas R Laughery

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Regional VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 305.76

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-768773

Amount of Each Receipt this Period  
43.68

**SUBTOTAL** of Receipts This Page (optional) ..... ► **170.24**

**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 78 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Thomas R Laughery

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Regional VP

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 349.44

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-891146

Amount of Each Receipt this Period

43.68

**B.**

Full Name (Last, First, Middle Initial)  
Thomas R Laughery

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Regional VP

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 393.12

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-937504

Amount of Each Receipt this Period

43.68

**C.**

Full Name (Last, First, Middle Initial)  
Howard R Lewis

Mailing Address Five Moore Drive

City State Zip Code  
Res. Triangle Park NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC EXECUTIVE

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 205.11

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-937801

Amount of Each Receipt this Period

22.79

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

110.15

**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 79 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Robert P Lewis		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-889515		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 26.93	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Market Development Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 215.44			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Robert P Lewis		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-935878		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 26.93	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Market Development Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 242.37			

<b>C.</b>	Full Name (Last, First, Middle Initial) Teresa L Little		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-888266		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 25.72	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Business Analysis Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.76			

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

79.58

**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: PAGE 80 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Teresa L Little

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Business Analysis Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.48

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-934635

Amount of Each Receipt this Period  
25.72

**B.**

Full Name (Last, First, Middle Initial)  
Leah L Lorber

Mailing Address 5 Five Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.43

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-769476

Amount of Each Receipt this Period  
29.49

**C.**

Full Name (Last, First, Middle Initial)  
Leah L Lorber

Mailing Address 5 Five Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.92

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-891846

Amount of Each Receipt this Period  
29.49

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **84.70**

**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 81 / 171
	<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Leah L Lorber		Date of Receipt
	Mailing Address 5 Five Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 30 / 2010
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-938200
Name of Employer GlaxoSmithKline LLC		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 265.41	<input type="text"/> 29.49

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Robert S Luria		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 02 / 2010
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-765950
Name of Employer GlaxoSmithKline LLC		Occupation Exec Acct Mgr Govt Affrs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 215.95	<input type="text"/> 30.85

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Robert S Luria		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 16 / 2010
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-888335
Name of Employer GlaxoSmithKline LLC		Occupation Exec Acct Mgr Govt Affrs	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 246.80	<input type="text"/> 30.85

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 91.19
<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 82 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Robert S Luria

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 277.65

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-934704

Amount of Each Receipt this Period  
30.85

**B.**

Full Name (Last, First, Middle Initial)  
Gwenda L Lynch

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 213.66

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-936161

Amount of Each Receipt this Period  
23.74

**C.**

Full Name (Last, First, Middle Initial)  
Jan C Lyons

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Tax Audit & Litigation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.94

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

**Transaction ID:** A2010-768765

Amount of Each Receipt this Period  
39.42

**SUBTOTAL** of Receipts This Page (optional) ..... ► **94.01**

**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 83 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Jan C Lyons		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 200 N. 16th Street		<b>Transaction ID:</b> A2010-891138		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 39.42	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Dir Tax Audit & Litigation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 315.36			

<b>B.</b>	Full Name (Last, First, Middle Initial) Jan C Lyons		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 200 N. 16th Street		<b>Transaction ID:</b> A2010-937496		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 39.42	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Dir Tax Audit & Litigation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 354.78			

<b>C.</b>	Full Name (Last, First, Middle Initial) Patrick J Madden		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-935628		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 23.48	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation District Sales Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 211.32			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	102.32
<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 84 / 171
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Michael L Mader		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 1 6 / 2 0 1 0
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-889000
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 202.80	<input type="text"/> 25.35

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Michael L Mader		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-935364
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 228.15	<input type="text"/> 25.35

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary Catherin Mantho		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 0 2 / 2 0 1 0
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-768979
Name of Employer GlaxoSmithKline LLC		Occupation EXECUTIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 224.35	<input type="text"/> 32.05

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 82.75
<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 85 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mary Catherin Mantho

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 256.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Transaction ID: A2010-891351

Amount of Each Receipt this Period

32.05
-------

**B.**

Full Name (Last, First, Middle Initial)  
Mary Catherin Mantho

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 288.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Transaction ID: A2010-937706

Amount of Each Receipt this Period

32.05
-------

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Kim I Marburger

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 241.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	1	0

Transaction ID: A2010-768424

Amount of Each Receipt this Period

34.53
-------

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

98.63

**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 86 / 171

(check only one)

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

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Kim I Marburger

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 276.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Transaction ID: A2010-890798

Amount of Each Receipt this Period

34.53
-------

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Kim I Marburger

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 310.77

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Transaction ID: A2010-937157

Amount of Each Receipt this Period

34.53
-------

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Marc J Marchand

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Account Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 202.16

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	1	0

Transaction ID: A2010-768857

Amount of Each Receipt this Period

28.88
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**SUBTOTAL** of Receipts This Page (optional) .....

97.94

**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: PAGE 87 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Marc J Marchand		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-891230		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 28.88	
	FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer GlaxoSmithKline LLC		Occupation Exec Account Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 231.04			

<b>B.</b>	Full Name (Last, First, Middle Initial) Robert M McDavid		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-935421		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 24.98	
	FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 224.82			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Robert S McGowan		Date of Receipt MM / DD / YYYY 04 / 02 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-767587		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 30.49	
	FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer GlaxoSmithKline LLC		Occupation Exec Acct Mgr IHM			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 213.43			

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

84.35

**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 88 / 171  
(check only one)

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Robert S McGowan

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Exec Acct Mgr IHM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243.92

Date of Receipt: 04 / 16 / 2010  
**Transaction ID: A2010-889964**  
Amount of Each Receipt this Period: 30.49

**B.** Full Name (Last, First, Middle Initial)  
Mr. Robert S McGowan

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Exec Acct Mgr IHM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
274.41

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: A2010-936326**  
Amount of Each Receipt this Period: 30.49

**C.** Full Name (Last, First, Middle Initial)  
Thais C McNeal

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr Mgr Multiculture Sls Strat

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
213.57

Date of Receipt: 04 / 02 / 2010  
**Transaction ID: A2010-767625**  
Amount of Each Receipt this Period: 30.51

**SUBTOTAL** of Receipts This Page (optional) ..... ► **91.49**

**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 89 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Thais C McNeal

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Sr Mgr Multiculture Sls Strat

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 244.08

Date of Receipt: 04 / 16 / 2010  
**Transaction ID: A2010-890002**  
 Amount of Each Receipt this Period: 30.51

**B.** Full Name (Last, First, Middle Initial)  
Thais C McNeal

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Sr Mgr Multiculture Sls Strat

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 274.59

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: A2010-936364**  
 Amount of Each Receipt this Period: 30.51

**C.** Full Name (Last, First, Middle Initial)  
Joseph P Meier

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Manager

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.43

Date of Receipt: 04 / 02 / 2010  
**Transaction ID: A2010-768692**  
 Amount of Each Receipt this Period: 60.49

**SUBTOTAL** of Receipts This Page (optional) ..... ► 121.51

**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 90 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Joseph P Meier

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 483.92

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

**Transaction ID:** A2010-891066

Amount of Each Receipt this Period  
60.49

**B.**

Full Name (Last, First, Middle Initial)  
Joseph P Meier

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer GlaxoSmithKline LLC Occupation Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 544.41

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-937424

Amount of Each Receipt this Period  
60.49

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Jimmy S Mercer

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation Exec Acct Mgr Govt Affrs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 203.77

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

**Transaction ID:** A2010-767301

Amount of Each Receipt this Period  
29.11

**SUBTOTAL** of Receipts This Page (optional) ..... ► **150.09**

**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 91 / 171

(check only one)

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

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Jimmy S Mercer

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 232.88

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-889681

Amount of Each Receipt this Period

29.11

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Jimmy S Mercer

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Acct Mgr Govt Affrs

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 261.99

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-936044

Amount of Each Receipt this Period

29.11

**C.**

Full Name (Last, First, Middle Initial)  
Cavan M Miller

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Regional Trainer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 202.80

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-891056

Amount of Each Receipt this Period

25.35

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

83.57

**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 92 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Cavan M Miller		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-937414		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 25.35	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Regional Trainer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 228.15			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. R. D Miller		Date of Receipt MM / DD / YYYY 04 / 02 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-767400		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 31.23	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Dir R&D Policy			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 218.61			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. R. D Miller		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-889780		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 31.23	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Dir R&D Policy			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.84			

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

87.81

**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 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. R. D Miller

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir R&D Policy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 281.07

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-936142

Amount of Each Receipt this Period  
31.23

**B.** Full Name (Last, First, Middle Initial)  
Mr. David L Mills

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.55

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935212

Amount of Each Receipt this Period  
22.95

**C.** Full Name (Last, First, Middle Initial)  
Edward G Mimikos

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Onc Sr Exec Acct Mgr Hosp

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 218.79

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935551

Amount of Each Receipt this Period  
24.31

**SUBTOTAL** of Receipts This Page (optional) ..... ► **78.49**

**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 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Robert C Montague

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir GMS Distribution

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 256.90

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

**Transaction ID:** A2010-767133

Amount of Each Receipt this Period  
36.70

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Robert C Montague

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir GMS Distribution

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 293.60

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

**Transaction ID:** A2010-889513

Amount of Each Receipt this Period  
36.70

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Robert C Montague

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir GMS Distribution

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 330.30

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-935876

Amount of Each Receipt this Period  
36.70

**SUBTOTAL** of Receipts This Page (optional) ..... ► **110.10**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 95 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Jose M Montanez		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-890332		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 26.71	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Sr Market Development Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 213.68			

<b>B.</b>	Full Name (Last, First, Middle Initial) Jose M Montanez		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-936693		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 26.71	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Sr Market Development Mgr			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.39			

<b>C.</b>	Full Name (Last, First, Middle Initial) Jessie S Moody		Date of Receipt MM / DD / YYYY 04 / 02 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-768366		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 29.15	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Exec Acct Mgr SP&AD			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 204.05			

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

82.57

**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 96 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)

Jessie S Moody

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Acct Mgr SP&AD

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 233.20

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-890740

Amount of Each Receipt this Period

29.15

**B.**

Full Name (Last, First, Middle Initial)

Jessie S Moody

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Acct Mgr SP&AD

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 262.35

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-937099

Amount of Each Receipt this Period

29.15

**C.**

Full Name (Last, First, Middle Initial)

Frederick A Morgan

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 208.48

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-889693

Amount of Each Receipt this Period

26.06

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

84.36

**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: PAGE 97 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Frederick A Morgan

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 234.54

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-936056

Amount of Each Receipt this Period  
26.06

**B.** Full Name (Last, First, Middle Initial)  
A. J Morris

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 203.04

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935451

Amount of Each Receipt this Period  
22.56

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

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP Pricing/Contrt Strat & Ops

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 390.46

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-768648

Amount of Each Receipt this Period  
55.78

**SUBTOTAL** of Receipts This Page (optional) ..... ► 104.40

**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 98 / 171
	<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) David A Moules	Date of Receipt MM / DD / YYYY 04 / 16 / 2010
	Mailing Address 200 N. 16th Street	<b>Transaction ID:</b> A2010-891022
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 55.78
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: GlaxoSmithKline LLC Occupation: VP Pricing/Contrt Strat & Ops Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 446.24	

<b>B.</b>	Full Name (Last, First, Middle Initial) David A Moules	Date of Receipt MM / DD / YYYY 04 / 30 / 2010
	Mailing Address 200 N. 16th Street	<b>Transaction ID:</b> A2010-937380
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 55.78
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: GlaxoSmithKline LLC Occupation: VP Pricing/Contrt Strat & Ops Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 502.02	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. John G Murray	Date of Receipt MM / DD / YYYY 04 / 30 / 2010
	Mailing Address 200 N. 16th Street	<b>Transaction ID:</b> A2010-936402
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 23.73
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer: GlaxoSmithKline LLC Occupation: Onc Sr Exec Acct Mgr Hosp Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 213.57	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>135.29</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 / 171  
(check only one)

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

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

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.78

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-937396

Amount of Each Receipt this Period  
23.42

**B.** Full Name (Last, First, Middle Initial)  
Mr. Alvin N Noble

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.03

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-934736

Amount of Each Receipt this Period  
24.67

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael D Ogus

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Mgr Clin Networks Info Mgmt

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.32

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-889642

Amount of Each Receipt this Period  
25.79

**SUBTOTAL** of Receipts This Page (optional) ..... ► 73.88

**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:	PAGE 100 / 171
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Michael D Ogus		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-936005
Name of Employer GlaxoSmithKline LLC		Occupation Mgr Clin Networks Info Mgmt	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 232.11	<input type="text"/> 25.79

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Richard M Olmstead		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 1 6 / 2 0 1 0
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-889698
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.44	<input type="text"/> 25.18

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Richard M Olmstead		Date of Receipt
	Mailing Address 5 Moore Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 4 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Research Triangle	NC	27709
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2010-936061
Name of Employer GlaxoSmithKline LLC		Occupation Sr District Sales Mgr	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 226.62	<input type="text"/> 25.18

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 76.15
<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 101 / 171

(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Marvin W Orrock

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Therapeutic Spec Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 213.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	1	0

Transaction ID: A2010-766196

Amount of Each Receipt this Period  
30.53

**B.**

Full Name (Last, First, Middle Initial)  
Marvin W Orrock

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Therapeutic Spec Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 244.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Transaction ID: A2010-888580

Amount of Each Receipt this Period  
30.53

**C.**

Full Name (Last, First, Middle Initial)  
Marvin W Orrock

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Therapeutic Spec Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 274.77

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Transaction ID: A2010-934946

Amount of Each Receipt this Period  
30.53

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

91.59

**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 102 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. John R Osting

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Exec Therapeutic Spec II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.97

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-935758

Amount of Each Receipt this Period  
22.33

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Robert E Padgett

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Product Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 221.67

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-937039

Amount of Each Receipt this Period  
24.63

**C.**

Full Name (Last, First, Middle Initial)  
Deborah Penrod

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.82

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

**Transaction ID:** A2010-768643

Amount of Each Receipt this Period  
30.26

**SUBTOTAL** of Receipts This Page (optional) ..... ► **77.22**

**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: PAGE 103 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Deborah Penrod

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 242.08

Date of Receipt: 04 / 16 / 2010

Transaction ID: A2010-891017

Amount of Each Receipt this Period: 30.26

**B.**

Full Name (Last, First, Middle Initial)  
Deborah Penrod

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr Counsel

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 272.34

Date of Receipt: 04 / 30 / 2010

Transaction ID: A2010-937375

Amount of Each Receipt this Period: 30.26

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Gregory W Peterson

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 278.88

Date of Receipt: 04 / 02 / 2010

Transaction ID: A2010-766298

Amount of Each Receipt this Period: 39.84

**SUBTOTAL** of Receipts This Page (optional) ..... ► 100.36

**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: PAGE 104 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Gregory W Peterson

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Regional VP

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 318.72

Date of Receipt: MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-888682

Amount of Each Receipt this Period: 39.84

**B.** Full Name (Last, First, Middle Initial)  
Mr. Gregory W Peterson

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Regional VP

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 358.56

Date of Receipt: MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935047

Amount of Each Receipt this Period: 39.84

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jeffrey L Peterson

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Dir Strategic Ops

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 241.22

Date of Receipt: MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-768310

Amount of Each Receipt this Period: 34.46

**SUBTOTAL** of Receipts This Page (optional) ..... ► **114.14**

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



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 171  
(check only one)

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

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Jeffrey L Peterson		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-890684		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 34.46	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Dir Strategic Ops			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.68			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Jeffrey L Peterson		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-937044		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 34.46	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Dir Strategic Ops			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 310.14			

<b>C.</b>	Full Name (Last, First, Middle Initial) Daniel J Phelan		Date of Receipt MM / DD / YYYY 04 / 02 / 2010		
	Mailing Address 200 N. 16th Street		<b>Transaction ID:</b> A2010-767777		
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Receipt this Period 127.88	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation SVP Human Resources			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 895.16			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	196.80
<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: PAGE 106 / 171  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Daniel J Phelan

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: SVP Human Resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1023.04

Date of Receipt: MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-890153

Amount of Each Receipt this Period: 127.88

**B.**

Full Name (Last, First, Middle Initial)  
Daniel J Phelan

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: SVP Human Resources

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.92

Date of Receipt: MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-936515

Amount of Each Receipt this Period: 127.88

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Bradley K Phillips

Mailing Address 5 Moore Drive

City Research Triangle State NC Zip Code 27709

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

Name of Employer: GlaxoSmithKline LLC Occupation: Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.44

Date of Receipt: MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-888864

Amount of Each Receipt this Period: 25.18

**SUBTOTAL** of Receipts This Page (optional) ..... ► **280.94**

**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: PAGE 107 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Bradley K Phillips

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.62

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935229

Amount of Each Receipt this Period  
25.18

**B.** Full Name (Last, First, Middle Initial)  
David Polaneczky

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Therapeutic Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.97

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-936454

Amount of Each Receipt this Period  
22.33

**C.** Full Name (Last, First, Middle Initial)  
Mr. Michael J Poteran

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC NeuroHlth Sr Exec Clin Spec II

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 206.46

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-934675

Amount of Each Receipt this Period  
22.94

**SUBTOTAL** of Receipts This Page (optional) ..... ► **70.45**

**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 108 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
John J Powers  
Mailing Address 200 N. 16th Street  
City Philadelphia State PA Zip Code 19102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 212.10  
Date of Receipt 04 / 02 / 2010  
Transaction ID: A2010-767966  
Amount of Each Receipt this Period 30.30

**B.** Full Name (Last, First, Middle Initial)  
John J Powers  
Mailing Address 200 N. 16th Street  
City Philadelphia State PA Zip Code 19102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 242.40  
Date of Receipt 04 / 16 / 2010  
Transaction ID: A2010-890342  
Amount of Each Receipt this Period 30.30

**C.** Full Name (Last, First, Middle Initial)  
John J Powers  
Mailing Address 200 N. 16th Street  
City Philadelphia State PA Zip Code 19102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation EXECUTIVE  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 272.70  
Date of Receipt 04 / 30 / 2010  
Transaction ID: A2010-936703  
Amount of Each Receipt this Period 30.30

**SUBTOTAL** of Receipts This Page (optional) ..... ► 90.90  
**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: PAGE 109 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Patricia D Provencher  
Mailing Address 200 N. 16th Street  
City Philadelphia State PA Zip Code 19102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation Onc Sr Exec Acct Mgr Hosp  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.16  
Date of Receipt 04 / 30 / 2010  
Transaction ID: A2010-937417  
Amount of Each Receipt this Period 22.24

**B.** Full Name (Last, First, Middle Initial)  
Mr. Philip G Pruitt  
Mailing Address 5 Moore Drive  
City Research Triangle State NC Zip Code 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation NeuroHealth Regional Sales Dir  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 205.02  
Date of Receipt 04 / 30 / 2010  
Transaction ID: A2010-935009  
Amount of Each Receipt this Period 22.78

**C.** Full Name (Last, First, Middle Initial)  
Roger J Richter  
Mailing Address 5 Moore Drive  
City Research Triangle State NC Zip Code 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation Sr District Sales Mgr  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 219.60  
Date of Receipt 04 / 30 / 2010  
Transaction ID: A2010-937165  
Amount of Each Receipt this Period 24.40

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 69.42  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 110 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Michelle Rodriguez

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: HIV Regional Sales Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
223.68

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

**Transaction ID:** A2010-889626

Amount of Each Receipt this Period  
27.96

**B.**

Full Name (Last, First, Middle Initial)  
Michelle Rodriguez

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: HIV Regional Sales Dir

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
251.64

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

**Transaction ID:** A2010-935989

Amount of Each Receipt this Period  
27.96

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Thomas L Rogers

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: District Sales Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
201.33

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

**Transaction ID:** A2010-935962

Amount of Each Receipt this Period  
22.37

**SUBTOTAL** of Receipts This Page (optional) ..... ► **78.29**

**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 111 / 171  
(check only one)

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

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Gregory A Romanowski		Date of Receipt MM / DD / YYYY 04 / 02 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-766886		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 31.37	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Market Development Dir			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 219.59			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Gregory A Romanowski		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-889266		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 31.37	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Market Development Dir			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.96			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Gregory A Romanowski		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-935630		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 31.37	
	FEC ID number of contributing federal political committee. C				
	Name of Employer GlaxoSmithKline LLC	Occupation Market Development Dir			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 282.33			

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

94.11

**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 112 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Paula J Rose

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 251.93

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

Transaction ID: A2010-767954

Amount of Each Receipt this Period

35.99

**B.**

Full Name (Last, First, Middle Initial)  
Paula J Rose

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 287.92

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-890330

Amount of Each Receipt this Period

35.99

**C.**

Full Name (Last, First, Middle Initial)  
Paula J Rose

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 323.91

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-936691

Amount of Each Receipt this Period

35.99

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

107.97

**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 113 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Runstrom

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Pharma Sr Exec Sales Rep

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 212.94

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-935605

Amount of Each Receipt this Period  
23.66

**B.**

Full Name (Last, First, Middle Initial)  
Vivian L Ryan

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 213.92

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

**Transaction ID:** A2010-891114

Amount of Each Receipt this Period  
26.74

**C.**

Full Name (Last, First, Middle Initial)  
Vivian L Ryan

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Market Development Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.66

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-937472

Amount of Each Receipt this Period  
26.74

**SUBTOTAL** of Receipts This Page (optional) ..... ► **77.14**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 / 171  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Gary J Salamido

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Account Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
231.42

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-768710

Amount of Each Receipt this Period  
33.06

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Gary J Salamido

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Account Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
264.48

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-891084

Amount of Each Receipt this Period  
33.06

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Gary J Salamido

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Account Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
297.54

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-937442

Amount of Each Receipt this Period  
33.06

**SUBTOTAL** of Receipts This Page (optional) ..... ► **99.18**

**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 115 / 171		
	<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mark J Santry

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Strategy Planning

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 236.60

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

**Transaction ID:** A2010-768277

Amount of Each Receipt this Period  
33.80

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mark J Santry

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Strategy Planning

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.40

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

**Transaction ID:** A2010-890651

Amount of Each Receipt this Period  
33.80

**C.** Full Name (Last, First, Middle Initial)  
Mr. Mark J Santry

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Strategy Planning

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 304.20

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-937011

Amount of Each Receipt this Period  
33.80

**SUBTOTAL** of Receipts This Page (optional) ..... ► **101.40**

**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 116 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

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

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC NeuroHealth Sr Exec Clin Spec

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.87

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-934838

Amount of Each Receipt this Period  
22.43

**B.** Full Name (Last, First, Middle Initial)  
David R Schiman

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 203.91

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-766752

Amount of Each Receipt this Period  
29.13

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

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 233.04

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-889133

Amount of Each Receipt this Period  
29.13

**SUBTOTAL** of Receipts This Page (optional) ..... ► 80.69

**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 117 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)

David R Schiman

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC NeuroHealth Regional Sales Dir

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 262.17

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-935497

Amount of Each Receipt this Period

29.13

**B.**

Full Name (Last, First, Middle Initial)

Scottie A Scholl

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 218.52

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-937097

Amount of Each Receipt this Period

24.28

**C.**

Full Name (Last, First, Middle Initial)

Mr. William Schuyler

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP Fed Gov Relations Trade

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 282.66

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

Transaction ID: A2010-767993

Amount of Each Receipt this Period

40.38

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

93.79

**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 118 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. William Schuyler

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP Fed Gov Relations Trade

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
323.04

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

**Transaction ID:** A2010-890369

Amount of Each Receipt this Period  
40.38

**B.** Full Name (Last, First, Middle Initial)  
Mr. William Schuyler

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP Fed Gov Relations Trade

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
461.93

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-936730

Amount of Each Receipt this Period  
138.89

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth T Seifert

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Dir Public Policy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
259.21

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

**Transaction ID:** A2010-767408

Amount of Each Receipt this Period  
37.03

**SUBTOTAL** of Receipts This Page (optional) ..... ► **216.30**

**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 119 / 171
	<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth T Seifert

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC    Occupation: Dir Public Policy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 296.24

Date of Receipt: 04 / 16 / 2010  
Transaction ID: A2010-889788  
Amount of Each Receipt this Period: 37.03

**B.** Full Name (Last, First, Middle Initial)  
Elizabeth T Seifert

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC    Occupation: Dir Public Policy

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 333.27

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-936150  
Amount of Each Receipt this Period: 37.03

**C.** Full Name (Last, First, Middle Initial)  
Mr. James T Shinske

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC    Occupation: Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 203.36

Date of Receipt: 04 / 16 / 2010  
Transaction ID: A2010-890191  
Amount of Each Receipt this Period: 25.42

**SUBTOTAL** of Receipts This Page (optional) ..... ► 99.48

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 120 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. James T Shinske

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr District Sales Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
228.78

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: A2010-936553**  
Amount of Each Receipt this Period: 25.42

**B.** Full Name (Last, First, Middle Initial)  
Mr. William A Shore

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Dir Community Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243.67

Date of Receipt: 04 / 02 / 2010  
**Transaction ID: A2010-767433**  
Amount of Each Receipt this Period: 34.81

**C.** Full Name (Last, First, Middle Initial)  
Mr. William A Shore

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Dir Community Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
278.48

Date of Receipt: 04 / 16 / 2010  
**Transaction ID: A2010-889812**  
Amount of Each Receipt this Period: 34.81

**SUBTOTAL** of Receipts This Page (optional) ..... ► **95.04**

**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 121 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. William A Shore

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Dir Community Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 313.29

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-936174  
Amount of Each Receipt this Period: 34.81

**B.** Full Name (Last, First, Middle Initial)  
Sandeep Singh

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Pharma Sr Sales Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.04

Date of Receipt: 04 / 16 / 2010  
Transaction ID: A2010-889948  
Amount of Each Receipt this Period: 25.63

**C.** Full Name (Last, First, Middle Initial)  
Sandeep Singh

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Pharma Sr Sales Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.67

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-936310  
Amount of Each Receipt this Period: 25.63

**SUBTOTAL** of Receipts This Page (optional) ..... ► 86.07

**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 122 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Scott A Smith		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-889444		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 27.31	
	FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer GlaxoSmithKline LLC		
Occupation Customer Mktg Mgr		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 218.48					

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Scott A Smith		Date of Receipt MM / DD / YYYY 04 / 30 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-935807		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 28.67	
	FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer GlaxoSmithKline LLC		
Occupation Customer Mktg Mgr		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 247.15					

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Woodie L Smith		Date of Receipt MM / DD / YYYY 04 / 16 / 2010		
	Mailing Address 5 Moore Drive		<b>Transaction ID:</b> A2010-890981		
	City Research Triangle	State NC	Zip Code 27709	Amount of Each Receipt this Period 26.23	
	FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer GlaxoSmithKline LLC		
Occupation Sr District Sales Mgr		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Aggregate Year-to-Date ▼ 209.84					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	82.21
<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 123 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Woodie L Smith

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr District Sales Mgr

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
236.07

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-937338  
Amount of Each Receipt this Period: 26.23

**B.**

Full Name (Last, First, Middle Initial)  
Cynthia C Snyder

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr Acct Mgr SP&AD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
218.48

Date of Receipt: 04 / 16 / 2010  
Transaction ID: A2010-891044  
Amount of Each Receipt this Period: 27.31

**C.**

Full Name (Last, First, Middle Initial)  
Cynthia C Snyder

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC  
Occupation: Sr Acct Mgr SP&AD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.79

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-937402  
Amount of Each Receipt this Period: 27.31

**SUBTOTAL** of Receipts This Page (optional) ..... ► **80.85**

**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 124 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steve R Sons

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP HR Operations US Comm

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 336.70

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-766551

Amount of Each Receipt this Period  
48.10

**B.** Full Name (Last, First, Middle Initial)  
Mr. Steve R Sons

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP HR Operations US Comm

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 384.80

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-888933

Amount of Each Receipt this Period  
48.10

**C.** Full Name (Last, First, Middle Initial)  
Mr. Steve R Sons

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP HR Operations US Comm

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 432.90

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935298

Amount of Each Receipt this Period  
48.10

**SUBTOTAL** of Receipts This Page (optional) ..... ► **144.30**

**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 125 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Jessica J Stewart

Mailing Address Five Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 265.38

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-769477

Amount of Each Receipt this Period  
44.23

**B.**

Full Name (Last, First, Middle Initial)  
Jessica J Stewart

Mailing Address Five Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 309.61

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-891847

Amount of Each Receipt this Period  
44.23

**C.**

Full Name (Last, First, Middle Initial)  
Jessica J Stewart

Mailing Address Five Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 353.84

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-938201

Amount of Each Receipt this Period  
44.23

**SUBTOTAL** of Receipts This Page (optional) ..... ► 132.69

**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 126 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Timothy Sullivan

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 355.03

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

**Transaction ID:** A2010-767694

Amount of Each Receipt this Period  
54.62

**B.**

Full Name (Last, First, Middle Initial)  
Timothy Sullivan

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 409.65

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

**Transaction ID:** A2010-890071

Amount of Each Receipt this Period  
54.62

**C.**

Full Name (Last, First, Middle Initial)  
Timothy Sullivan

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 464.27

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-936433

Amount of Each Receipt this Period  
54.62

**SUBTOTAL** of Receipts This Page (optional) ..... ► **163.86**

**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: PAGE 127 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Mario M Swann

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Market Development Mgr

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.88

Date of Receipt: 04 / 16 / 2010  
**Transaction ID:** A2010-889685  
 Amount of Each Receipt this Period: 25.61

**B.** Full Name (Last, First, Middle Initial)  
Mr. Mario M Swann

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Market Development Mgr

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.49

Date of Receipt: 04 / 30 / 2010  
**Transaction ID:** A2010-936048  
 Amount of Each Receipt this Period: 25.61

**C.** Full Name (Last, First, Middle Initial)  
Janet L Taylor

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Exec Account Mgr

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 218.48

Date of Receipt: 04 / 16 / 2010  
**Transaction ID:** A2010-888861  
 Amount of Each Receipt this Period: 27.31

**SUBTOTAL** of Receipts This Page (optional) ..... ► 78.53

**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 128 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)

Janet L Taylor

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Exec Account Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 245.79

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-935226

Amount of Each Receipt this Period

27.31

**B.**

Full Name (Last, First, Middle Initial)

Philip M Thevenet

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Mgr Fed Govt Rel

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 208.53

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-935327

Amount of Each Receipt this Period

23.17

**C.**

Full Name (Last, First, Middle Initial)

Howard Thomas

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Area/Segment VP-B

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 217.07

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

Transaction ID: A2010-768072

Amount of Each Receipt this Period

31.01

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

81.49

**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 129 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

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

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Area/Segment VP-B

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 248.08

Date of Receipt: 04 / 16 / 2010  
Transaction ID: A2010-890448  
Amount of Each Receipt this Period: 31.01

**B.** Full Name (Last, First, Middle Initial)  
Howard Thomas

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Area/Segment VP-B

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 279.09

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-936809  
Amount of Each Receipt this Period: 31.01

**C.** Full Name (Last, First, Middle Initial)  
Mr. John W Thomas

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Pharma Sr Exec Sales Rep

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 205.38

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-936008  
Amount of Each Receipt this Period: 22.82

**SUBTOTAL** of Receipts This Page (optional) ..... ► 84.84

**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 130 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial) Alfred V Thompson		Date of Receipt MM / DD / YYYY 04 / 02 / 2010
Mailing Address 200 N. 16th Street		<b>Transaction ID:</b> A2010-768681
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 36.78
Name of Employer GlaxoSmithKline LLC	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.46	

**B.**

Full Name (Last, First, Middle Initial) Alfred V Thompson		Date of Receipt MM / DD / YYYY 04 / 16 / 2010
Mailing Address 200 N. 16th Street		<b>Transaction ID:</b> A2010-891055
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 36.78
Name of Employer GlaxoSmithKline LLC	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 294.24	

**C.**

Full Name (Last, First, Middle Initial) Alfred V Thompson		Date of Receipt MM / DD / YYYY 04 / 30 / 2010
Mailing Address 200 N. 16th Street		<b>Transaction ID:</b> A2010-937413
City Philadelphia	State PA	Zip Code 19102
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 36.78
Name of Employer GlaxoSmithKline LLC	Occupation Regional VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 331.02	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>110.34</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 131 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Susan K Tringali

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Oncology Regional Sales Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 208.60

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-767102

Amount of Each Receipt this Period  
29.80

**B.**

Full Name (Last, First, Middle Initial)  
Susan K Tringali

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Oncology Regional Sales Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 238.40

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-889482

Amount of Each Receipt this Period  
29.80

**C.**

Full Name (Last, First, Middle Initial)  
Susan K Tringali

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Oncology Regional Sales Dir

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 268.20

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935845

Amount of Each Receipt this Period  
29.80

**SUBTOTAL** of Receipts This Page (optional) ..... ► 89.40

**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 132 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Stephanie L Trotter

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 248.50

Date of Receipt: 04 / 02 / 2010  
**Transaction ID: A2010-768144**  
 Amount of Each Receipt this Period: 35.50

**B.**

Full Name (Last, First, Middle Initial)  
Stephanie L Trotter

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 284.00

Date of Receipt: 04 / 16 / 2010  
**Transaction ID: A2010-890520**  
 Amount of Each Receipt this Period: 35.50

**C.**

Full Name (Last, First, Middle Initial)  
Stephanie L Trotter

Mailing Address 200 N. 16th Street

City Philadelphia State PA Zip Code 19102

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

Name of Employer: GlaxoSmithKline LLC Occupation: Regional VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 319.50

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: A2010-936881**  
 Amount of Each Receipt this Period: 35.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► 106.50

**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 133 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)

Carrie E Wagstaff

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 208.25

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

Transaction ID: A2010-767290

Amount of Each Receipt this Period

29.75

**B.**

Full Name (Last, First, Middle Initial)

Carrie E Wagstaff

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 238.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

Transaction ID: A2010-889670

Amount of Each Receipt this Period

29.75

**C.**

Full Name (Last, First, Middle Initial)

Carrie E Wagstaff

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 267.75

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

Transaction ID: A2010-936033

Amount of Each Receipt this Period

29.75

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

89.25

**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 134 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ronnie B Wallace

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Acting Mgr. Oper Plng

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 200.61

Date of Receipt: 04 / 30 / 2010  
Transaction ID: A2010-934774  
Amount of Each Receipt this Period: 22.29

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

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Sr District Sales Mgr

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 221.83

Date of Receipt: 04 / 02 / 2010  
Transaction ID: A2010-767823  
Amount of Each Receipt this Period: 31.69

**C.** Full Name (Last, First, Middle Initial)  
Mr. Brian Walsh

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC   Occupation: Sr District Sales Mgr

Receipt For:  Primary    General    Other (specify) ▼

Aggregate Year-to-Date ▼ 253.52

Date of Receipt: 04 / 16 / 2010  
Transaction ID: A2010-890199  
Amount of Each Receipt this Period: 31.69

**SUBTOTAL** of Receipts This Page (optional) ..... ► 85.67

**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 135 / 171
	<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

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

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC    Occupation: Sr District Sales Mgr

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.21

Date of Receipt: 04 / 30 / 2010  
**Transaction ID: A2010-936561**  
 Amount of Each Receipt this Period: 31.69

**B.** Full Name (Last, First, Middle Initial)  
Sarah J Walsh

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC    Occupation: VP Fed Gov Rel.Tax & Pharm

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 372.13

Date of Receipt: 04 / 02 / 2010  
**Transaction ID: A2010-767860**  
 Amount of Each Receipt this Period: 82.69

**C.** Full Name (Last, First, Middle Initial)  
Sarah J Walsh

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer: GlaxoSmithKline LLC    Occupation: VP Fed Gov Rel.Tax & Pharm

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 454.82

Date of Receipt: 04 / 16 / 2010  
**Transaction ID: A2010-890236**  
 Amount of Each Receipt this Period: 82.69

**SUBTOTAL** of Receipts This Page (optional) ..... ► 197.07

**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 136 / 171  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Sarah J Walsh

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC VP Fed Gov Rel.Tax & Pharm

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 593.71

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-936598

Amount of Each Receipt this Period  
138.89

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey A Watson

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sourcing Group Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 201.36

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-888204

Amount of Each Receipt this Period  
25.17

**C.**

Full Name (Last, First, Middle Initial)  
Jeffrey A Watson

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sourcing Group Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.53

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-934575

Amount of Each Receipt this Period  
25.17

**SUBTOTAL** of Receipts This Page (optional) ..... ► **189.23**

**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 137 / 171  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
S. Mark Werner

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation VP & Assoc General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 502.81

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 1 0

**Transaction ID:** A2010-768989

Amount of Each Receipt this Period  
71.83

**B.** Full Name (Last, First, Middle Initial)  
S. Mark Werner

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation VP & Assoc General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 574.64

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 1 6 / 2 0 1 0

**Transaction ID:** A2010-891361

Amount of Each Receipt this Period  
71.83

**C.** Full Name (Last, First, Middle Initial)  
S. Mark Werner

Mailing Address Five Moore Drive

City Res. Triangle Park State NC Zip Code 27709

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

Name of Employer GlaxoSmithKline LLC Occupation VP & Assoc General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 646.47

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** A2010-937716

Amount of Each Receipt this Period  
71.83

**SUBTOTAL** of Receipts This Page (optional) ..... ► 215.49

**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 138 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Anne C Whitaker  
Mailing Address 5 Moore Drive  
City State Zip Code  
Research Triangle NC 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
GlaxoSmithKline LLC VP Sales Training  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 379.47  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 0 2 / 2 0 1 0  
Transaction ID: A2010-768738  
Amount of Each Receipt this Period 54.21

**B.** Full Name (Last, First, Middle Initial)  
Anne C Whitaker  
Mailing Address 5 Moore Drive  
City State Zip Code  
Research Triangle NC 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
GlaxoSmithKline LLC VP Sales Training  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 433.68  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 1 0  
Transaction ID: A2010-891112  
Amount of Each Receipt this Period 54.21

**C.** Full Name (Last, First, Middle Initial)  
Anne C Whitaker  
Mailing Address 5 Moore Drive  
City State Zip Code  
Research Triangle NC 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
GlaxoSmithKline LLC VP Sales Training  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 487.89  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 0  
Transaction ID: A2010-937470  
Amount of Each Receipt this Period 54.21

**SUBTOTAL** of Receipts This Page (optional) ..... ► 162.63  
**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 139 / 171
	<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	

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Janice M Whitaker	Date of Receipt MM / DD / YYYY 04 / 02 / 2010
	Mailing Address 5 Moore Drive	<b>Transaction ID:</b> A2010-765922
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 67.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: SVP Quality GMS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 470.12	

<b>B.</b>	Full Name (Last, First, Middle Initial) Janice M Whitaker	Date of Receipt MM / DD / YYYY 04 / 16 / 2010
	Mailing Address 5 Moore Drive	<b>Transaction ID:</b> A2010-888307
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 67.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: SVP Quality GMS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 537.28	

<b>C.</b>	Full Name (Last, First, Middle Initial) Janice M Whitaker	Date of Receipt MM / DD / YYYY 04 / 30 / 2010
	Mailing Address 5 Moore Drive	<b>Transaction ID:</b> A2010-934676
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 67.16
	FEC ID number of contributing federal political committee. C	
	Name of Employer: GlaxoSmithKline LLC Occupation: SVP Quality GMS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 604.44	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	201.48
<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: PAGE 140 / 171  
(check only one)

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

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)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Steven D White

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 219.51

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-935352

Amount of Each Receipt this Period  
24.39

**B.** Full Name (Last, First, Middle Initial)  
Sharon Wible

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Product Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 260.19

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-767656

Amount of Each Receipt this Period  
37.17

**C.** Full Name (Last, First, Middle Initial)  
Sharon Wible

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Product Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 297.36

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2010

**Transaction ID:** A2010-890033

Amount of Each Receipt this Period  
37.17

**SUBTOTAL** of Receipts This Page (optional) ..... ► **98.73**

**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 141 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Sharon Wible  
Mailing Address 200 N. 16th Street  
City Philadelphia State PA Zip Code 19102  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation Sr Product Mgr  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 334.53  
Date of Receipt 04 / 30 / 2010  
Transaction ID: A2010-936395  
Amount of Each Receipt this Period 37.17

**B.** Full Name (Last, First, Middle Initial)  
Charles G Williams  
Mailing Address 5 Moore Drive  
City Research Triangle State NC Zip Code 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation Account Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 227.15  
Date of Receipt 04 / 02 / 2010  
Transaction ID: A2010-767785  
Amount of Each Receipt this Period 32.45

**C.** Full Name (Last, First, Middle Initial)  
Charles G Williams  
Mailing Address 5 Moore Drive  
City Research Triangle State NC Zip Code 27709  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GlaxoSmithKline LLC Occupation Account Director  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 259.60  
Date of Receipt 04 / 16 / 2010  
Transaction ID: A2010-890161  
Amount of Each Receipt this Period 32.45

**SUBTOTAL** of Receipts This Page (optional) ..... ► 102.07  
**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 142 / 171
	<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Charles G Williams	Date of Receipt MM / DD / YYYY 04 / 30 / 2010
	Mailing Address 5 Moore Drive	<b>Transaction ID:</b> A2010-936523
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 32.45
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC Account Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.05	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Fred Williams	Date of Receipt MM / DD / YYYY 04 / 16 / 2010
	Mailing Address 5 Moore Drive	<b>Transaction ID:</b> A2010-889763
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 25.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.80	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Fred Williams	Date of Receipt MM / DD / YYYY 04 / 30 / 2010
	Mailing Address 5 Moore Drive	<b>Transaction ID:</b> A2010-936125
	City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 25.35
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GlaxoSmithKline LLC District Sales Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.15	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	83.15
<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 143 / 171  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.** Full Name (Last, First, Middle Initial)  
Mr. Carl D Wilson

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC District Sales Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 204.39

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-934873

Amount of Each Receipt this Period  
22.71

**B.** Full Name (Last, First, Middle Initial)  
Gina Winnett

Mailing Address 200 N. 16th Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation  
GlaxoSmithKline LLC Immunization Dvlpmt Mgr

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 221.04

Date of Receipt  
MM / DD / YYYY  
04 / 30 / 2010

**Transaction ID:** A2010-937187

Amount of Each Receipt this Period  
24.56

**C.** Full Name (Last, First, Middle Initial)  
Elizabeth A Yost

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Account Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.79

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2010

**Transaction ID:** A2010-768796

Amount of Each Receipt this Period  
30.97

**SUBTOTAL** of Receipts This Page (optional) ..... ► 78.24

**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 144 / 171  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

**A.**

Full Name (Last, First, Middle Initial)  
Elizabeth A Yost

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Account Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 247.76

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	0

Transaction ID: A2010-891169

Amount of Each Receipt this Period

30.97
-------

**B.**

Full Name (Last, First, Middle Initial)  
Elizabeth A Yost

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Account Director

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 278.73

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Transaction ID: A2010-937527

Amount of Each Receipt this Period

30.97
-------

**C.**

Full Name (Last, First, Middle Initial)  
Mr. William A Yu

Mailing Address 5 Moore Drive

City State Zip Code  
Research Triangle NC 27709

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

Name of Employer Occupation  
GlaxoSmithKline LLC Sr Exec Therapeutic Specialist

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 202.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	0

Transaction ID: A2010-934839

Amount of Each Receipt this Period

22.48
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**SUBTOTAL** of Receipts This Page (optional) .....

84.42

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

15413.32



# 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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Griffith for Congress</p> <p>Mailing Address PO Box 1605</p> <p>City Alexandria State VA Zip Code 22313</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Parker Griffith</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: AL District: 05</p>	<p><b>Transaction ID:</b> B327987 <b>Date of Disbursement:</b> 04 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Elliott for Congress</p> <p>Mailing Address PO Box 3524</p> <p>City Little Rock State AR Zip Code 72203</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Joyce Elliott</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: AR District: 02</p>	<p><b>Transaction ID:</b> B326791 <b>Date of Disbursement:</b> 04 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Herger for Congress</p> <p>Mailing Address PO Box 1007</p> <p>City Willows State CA Zip Code 95988</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Wally Herger</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CA District: 02</p>	<p><b>Transaction ID:</b> B327986 <b>Date of Disbursement:</b> 04 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Price for Congress  Mailing Address P.O. Box 425  City Roswell State GA Zip Code 30077  Purpose of Disbursement Contribution Candidate Name Thomas E Price  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 06  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B327990 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) Friends of Dick Durbin  Mailing Address 200 East Jefferson St  City Falls Church State VA Zip Code 22046  Purpose of Disbursement Contribution Candidate Name Richard J Durbin  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:  Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B327982 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	011 Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) Roskam for Congress  Mailing Address P.O. Box 713  City Wheaton State IL Zip Code 60189  Purpose of Disbursement Contribution Candidate Name Peter J Roskam  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06  Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B327984 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00
	011 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: (check only one)

PAGE 147 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Davis for Congress</p> <p>Mailing Address 700 12th St NW #700</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Geoff Davis</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KY District: 04</p>	<p><b>Transaction ID:</b> B327994 <b>Date of Disbursement</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	0	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	2		2	0	1	0													
500.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Guthrie for Congress</p> <p>Mailing Address 700 1st St NW Ste 700</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Brett Guthrie</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KY District: 02</p>	<p><b>Transaction ID:</b> B327989 <b>Date of Disbursement</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	0	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	2		2	0	1	0													
1000.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mikulski for Senate</p> <p>Mailing Address 10 G Street NE Ste 570</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Barbara A Mikulski</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MD District:</p>	<p><b>Transaction ID:</b> B327996 <b>Date of Disbursement</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	2		2	0	1	0	1500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		2	2		2	0	1	0													
1500.00																						

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1" style="width: 100%;"><tr><td style="text-align: center;">3000.00</td></tr></table>	3000.00
3000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%;"><tr><td style="height: 20px;"></td></tr></table>	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 148 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mikulski for Senate</p> <p>Mailing Address 10 G Street NE Ste 570</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Barbara A Mikulski</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MD District:</p>	<p><b>Transaction ID:</b> B327998 <b>Date of Disbursement</b> 04 / 22 / 2010</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">1000.00</span></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Upton for All of Us</p> <p>Mailing Address 104 Hume Avenue</p> <p>City Alexandria State VA Zip Code 22301</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name Frederick S Upton</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 06</p>	<p><b>Transaction ID:</b> B327983 <b>Date of Disbursement</b> 04 / 22 / 2010</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">2500.00</span></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Republican Party of Minnesota</p> <p>Mailing Address 525 Park Street Suite 250</p> <p>City St Paul State MN Zip Code 55103</p> <p>Purpose of Disbursement Contribution <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: MN District: Not Applicable</p>	<p><b>Transaction ID:</b> B326962 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">1000.00</span></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<span style="border: 1px solid black; padding: 5px; display: inline-block;">4500.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 5px; display: inline-block;"> </span>

# 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)  
GlaxoSmithKline LLC PAC (GSK PAC)

A.	Full Name (Last, First, Middle Initial) Friends of Bennie Thompson <hr/> Mailing Address 236 Massachusetts Ave NE Ste 603 <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Contribution Candidate Name Bennie G Thompson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B328001 Date of Disbursement 04 / 22 / 2010 <hr/> Amount of Each Disbursement this Period 1500.00
B.	Full Name (Last, First, Middle Initial) McHenry for Congress <hr/> Mailing Address PO Box 1406 <hr/> City Hickory State NC Zip Code 28603 <hr/> Purpose of Disbursement Contribution Candidate Name Patrick McHenry Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B327516 Date of Disbursement 04 / 14 / 2010 <hr/> Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) The Richard Burr Committee <hr/> Mailing Address PO Box 5928 <hr/> City Winston-Salem State NC Zip Code 27113 <hr/> Purpose of Disbursement Contribution Candidate Name Richard Burr Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B327985 Date of Disbursement 04 / 22 / 2010 <hr/> Amount of Each Disbursement this Period 2000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 150 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Butterfield for Congress</p> <p>Mailing Address 228 2nd St SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name G. K Butterfield</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B327995 <b>Date of Disbursement</b> 04 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Hoeven for Senate</p> <p>Mailing Address P.O. Box 861</p> <p>City Bismarck State ND Zip Code 58502</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name John Hoeven</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B326960 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Rush Holt for Congress</p> <p>Mailing Address PO Box 782</p> <p>City Pennington State NJ Zip Code 08534</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name Rush D Holt</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 12</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B328002 <b>Date of Disbursement</b> 04 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 151 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Lance for Congress</p> <p>Mailing Address PO Box 225</p> <p>City Colonia State NJ Zip Code 07067</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Leonard Lance</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NJ District: 07</p>	<p><b>Transaction ID:</b> B327988 <b>Date of Disbursement</b> 04 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Zack Space for Congress</p> <p>Mailing Address PO Box 75214</p> <p>City Washington State DC Zip Code 20013</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Zachary T Space</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: OH District: 18</p>	<p><b>Transaction ID:</b> B327992 <b>Date of Disbursement</b> 04 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kurt Schrader for Congress</p> <p>Mailing Address PO Box 636</p> <p>City Annandale State VA Zip Code 22003</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Kurt Schrader</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: OR District: 05</p>	<p><b>Transaction ID:</b> B328000 <b>Date of Disbursement</b> 04 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p>

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 152 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

A.

Full Name (Last, First, Middle Initial)  
Walden for Congress

Mailing Address 104 Hume Avenue

City State Zip Code  
Alexandria VA 22301

Purpose of Disbursement  
Contribution

Candidate Name  
Gregory Paul Walden

Office Sought:  House  
 Senate  
 President  
State: OR District: 02

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: B327993

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mike Beebe for Governor</p> <p>Mailing Address 301 South Victory</p> <p>City Little Rock State AR Zip Code 72205</p> <p>Purpose of Disbursement P-2010 Governor AR</p> <p>Candidate Name Mike Beebe</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B326792</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Indiana House Democratic Caucus</p> <p>Mailing Address One N. Capitol Suite 200</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement State Party Cmte</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District: Not Applicable</p>	<p><b>Transaction ID:</b> B326969</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) House Republican Campaign Cmte</p> <p>Mailing Address P.O. Box 40454</p> <p>City Indianapolis State IN Zip Code 46244</p> <p>Purpose of Disbursement State Party Cmte</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District: Not Applicable</p>	<p><b>Transaction ID:</b> B326971</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p>011 Category/ Type</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="3000.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 154 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) IN Senate Democrats</p> <p>Mailing Address One N. Capitol Suite 200</p> <p>City Indianapolis State IN Zip Code 46204</p> <p>Purpose of Disbursement State Party Cmte</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p><b>Transaction ID:</b> B326973 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) IN Senate Majority Campaign Committee</p> <p>Mailing Address 47 South Meridian St. 2nd Floor</p> <p>City Indianapolis State IN Zip Code 46206</p> <p>Purpose of Disbursement State Party Cmte</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p><b>Transaction ID:</b> B326974 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Friends to Elect Vaneta Becker</p> <p>Mailing Address 4017 Cobble Field Drive</p> <p>City Evansville State IN Zip Code 47711</p> <p>Purpose of Disbursement P-2012 State Senate 50 IN</p> <p>Candidate Name Vaneta Becker</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B326981 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

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

1000.00

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

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

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Cmte to Elect Brian Bosma</p> <p>Mailing Address 9052 Nautical Watch Dr.</p> <p>City Indianapolis State IN Zip Code 46236</p> <p>Purpose of Disbursement P-2010 State House 88 IN</p> <p>Candidate Name Brian C. Bosma</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B326964 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Charlie Brown</p> <p>Mailing Address P.O. Box 315</p> <p>City Gary State IN Zip Code 46402</p> <p>Purpose of Disbursement P-2010 State House 03 IN</p> <p>Candidate Name Charlie Brown</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B326966 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Cmte to Elect Connie Lawson St. Senator</p> <p>Mailing Address Box 317</p> <p>City Danville State IN Zip Code 46122</p> <p>Purpose of Disbursement P-2012 State Senate 24 IN</p> <p>Candidate Name Connie Lawson</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B326967 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

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

1500.00

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

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

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FOR LINE NUMBER:  
(check only one)

PAGE 156 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Pat Miller for State Senator Cmte Mailing Address 1041 South Muesing Rd. City Indianapolis State IN Zip Code 46239 Purpose of Disbursement P-2012 State Senate 32 IN Candidate Name Patricia L Miller Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B326972 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00 Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Representative Welch Committee Mailing Address 2802 St. Remy Circle City Bloomington State IN Zip Code 47401 Purpose of Disbursement P-2010 State House 60 IN Candidate Name Peggy Welch Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B326975 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00 Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Greg Zoeller for Attorney General Mailing Address 3309 East 56th St City Indianapolis State IN Zip Code 46220 Purpose of Disbursement P-2012 State Att. General IN Candidate Name Greg Zoeller Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B326978 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00 Category/Type 011

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

1250.00

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

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

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FOR LINE NUMBER:  
(check only one)

PAGE 157 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Tom Apodaca for NC Senate Committee</p> <p>Mailing Address P.O. Box 1011</p> <p>City Hendersonville State NC Zip Code 28793</p> <p>Purpose of Disbursement P-2010 State Senate 48 NC</p> <p>Candidate Name Tom Apodaca</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B326946</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Phil F. Berger Campaign</p> <p>Mailing Address 311 Pinewood Place</p> <p>City Eden State NC Zip Code 27296</p> <p>Purpose of Disbursement P-2010 State Senate 26 NC</p> <p>Candidate Name Phillip Berger</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B326959</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Dan Blue Senate Committee</p> <p>Mailing Address 4917 Long Point Circle</p> <p>City Raleigh State NC Zip Code 27604</p> <p>Purpose of Disbursement P-2010 State Senate 14 NC</p> <p>Candidate Name Daniel T Blue, Jr.</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> B326952</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p>011 Category/ Type</p>

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

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

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

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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 158 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Harold J. Brubaker for House Committee</p> <p>Mailing Address 215 Back Creek Church Rd</p> <p>City Asheboro State NC Zip Code 27203</p> <p>Purpose of Disbursement P-2010 State House 78 NC</p> <p>Candidate Name Harold J Brubaker</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B326968 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Brunstetter for NC Senate</p> <p>Mailing Address 3054 Panther Ridge lane</p> <p>City Lewisville State NC Zip Code 27023</p> <p>Purpose of Disbursement P-2010 State Senate 31 NC</p> <p>Candidate Name Pete Brunstetter</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B326961 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee to Re-elect Becky Carney</p> <p>Mailing Address P.O. Box 32873</p> <p>City Charlotte State NC Zip Code 28232</p> <p>Purpose of Disbursement P-2010 State House 102 NC</p> <p>Candidate Name Becky Carney</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B326970 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

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

5000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
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PAGE 159 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

A.	Full Name (Last, First, Middle Initial) Jerry Dockham for NC House  Mailing Address P.O. Box 265  City Denton State NC Zip Code 27239  Purpose of Disbursement P-2010 State House 80 NC  Candidate Name Jerry C Dockham  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: B326976 Date of Disbursement 04 / 14 / 2010  Amount of Each Disbursement this Period 1000.00  011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Committee to Elect Linda Garrou  Mailing Address 3910 Camerille Farm Road  City Winston-Salem State NC Zip Code 27106  Purpose of Disbursement P-2010 State Senate 32 NC  Candidate Name Linda Dew Garrou  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: B326953 Date of Disbursement 04 / 14 / 2010  Amount of Each Disbursement this Period 2000.00  011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Cmte to Elect Bruce Goforth  Mailing Address 137 Stonecrest Drive  City Asheville State NC Zip Code 28803  Purpose of Disbursement P-2010 State House 115 NC  Candidate Name Bruce Goforth  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: B326977 Date of Disbursement 04 / 14 / 2010  Amount of Each Disbursement this Period 1000.00  011 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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FOR LINE NUMBER:  
(check only one)

PAGE 160 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Hackney for House Committee <hr/> Mailing Address 104 Carolina Forest Road <hr/> City Chapel Hill State NC Zip Code 27516 <hr/> Purpose of Disbursement P-2010 State House 54 NC Candidate Name Joe Hackney <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B326979 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00 Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Committee to Elect Hugh Holliman <hr/> Mailing Address 103 Sapona Road <hr/> City Lexington State NC Zip Code 27295 <hr/> Purpose of Disbursement P-2010 State House 81 NC Candidate Name Hugh Holliman <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B326980 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00 Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) Julia C. Howard for House <hr/> Mailing Address 203 Magnolia Ave <hr/> City Mocksville State NC Zip Code 27028 <hr/> Purpose of Disbursement P-2010 State House 79 NC Candidate Name Julia C Howard <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B326985 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
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PAGE 161 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

A.	Full Name (Last, First, Middle Initial) Clark Jenkins for N.C. Senate  Mailing Address P.O. Box 310  City Tarboro State NC Zip Code 27886  Purpose of Disbursement P-2010 State Senate 03 NC Candidate Name Clark Jenkins Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B326956 Date of Disbursement 04 / 14 / 2010  Amount of Each Disbursement this Period 2000.00  011 Category/ Type	
B.	Full Name (Last, First, Middle Initial) Daniel McComas Campaign  Mailing Address 1717 Soft Wind Way  City Wilmington State NC Zip Code 28403  Purpose of Disbursement P-2010 State House 19 NC Candidate Name Daniel F McComas Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B326984 Date of Disbursement 04 / 14 / 2010  Amount of Each Disbursement this Period 1000.00  011 Category/ Type	
C.	Full Name (Last, First, Middle Initial) Fred F. Steen II for NC House  Mailing Address 317 Daybrook Drive  City Landis State NC Zip Code 28088  Purpose of Disbursement P-2010 State House 76 NC Candidate Name Fred F Steen, II Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B326982 Date of Disbursement 04 / 14 / 2010  Amount of Each Disbursement this Period 1000.00  011 Category/ Type	

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

4000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 162 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Citizens for Richard Stevens  Mailing Address 132 Lochwood West  City Cary State NC Zip Code 27518  Purpose of Disbursement P-2010 State Senate 17 NC  Candidate Name Richard Stevens  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: B326963 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0  Amount of Each Disbursement this Period 2000.00  011 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) A.B. Swindell for Senate Cmte  Mailing Address 700 Birchwood Drive  City Nashville State NC Zip Code 27856  Purpose of Disbursement P-2010 State Senate 11 NC  Candidate Name A.B. Swindell  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: B326943 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0  Amount of Each Disbursement this Period 2000.00  011 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Committee to Elect Thom Tillis  Mailing Address 17209 Green Dolphin Lane  City Cornelius State NC Zip Code 28031  Purpose of Disbursement P-2010 State House 98 NC  Candidate Name Thom Tillis  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: B326983 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0  Amount of Each Disbursement this Period 2000.00  011 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
GlaxoSmithKline LLC PAC (GSK PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Wilkins for House Campaign Cmte</p> <p>Mailing Address 210 Fair Oaks Drive</p> <p>City Roxboro State NC Zip Code 27574</p> <p>Purpose of Disbursement P-2010 State House 55 NC</p> <p>Candidate Name Winfrey A Wilkins, Jr.</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B326965 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Ginny Burdick</p> <p>Mailing Address 6227 SW 18th Dr.</p> <p>City Portland State OR Zip Code 97239</p> <p>Purpose of Disbursement P-2012 State Senate 18 OR</p> <p>Candidate Name Ginny Burdick</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B326954 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Chris Dudley for Governor</p> <p>Mailing Address P.O. Box 9308</p> <p>City Portland State OR Zip Code 97207</p> <p>Purpose of Disbursement P-2010 Governor OR</p> <p>Candidate Name Chris Dudley</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B326955 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

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

2500.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 164 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bruce Hanna for State Representative</p> <p>Mailing Address 612 NW Cecil Ave.</p> <p>City Roseburg State OR Zip Code 97470</p> <p>Purpose of Disbursement P-2010 State House 07 OR</p> <p>Candidate Name Bruce Hanna</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B326958 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bruce Starr for Oregon Senate</p> <p>Mailing Address 22115 NW Imprie Dr. #290</p> <p>City Hillsboro State OR Zip Code 97124</p> <p>Purpose of Disbursement P-2010 State Senate 15 OR</p> <p>Candidate Name Bruce Starr</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B326951 <b>Date of Disbursement</b> 04 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Jeff Barker</p> <p>Mailing Address P.O. Box 6751</p> <p>City Aloha State OR Zip Code 97007</p> <p>Purpose of Disbursement P-2010 State House 28 OR</p> <p>Candidate Name Jeff Barker</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B327719 <b>Date of Disbursement</b> 04 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

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

2000.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 165 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Committee to Elect Ted Ferrioli  Mailing Address 530 E Main St  City John Day State OR Zip Code 97845  Purpose of Disbursement P-2012 State Senate 30 OR  Candidate Name Ted Ferrioli  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: B327724 Date of Disbursement 04 / 16 / 2010  Amount of Each Disbursement this Period 1000.00  011 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Committee Elect Larry George  Mailing Address 900 Court St NE  City Salem State OR Zip Code 97301  Purpose of Disbursement P-2010 State Senate 13 OR  Candidate Name Larry George  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: B327727 Date of Disbursement 04 / 16 / 2010  Amount of Each Disbursement this Period 1000.00  011 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Committee to Elect Dave Hunt  Mailing Address PO Box 67190  City Oak Grove State OR Zip Code 97268  Purpose of Disbursement P-2010 State House 40 OR  Candidate Name Dave Hunt  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: B327723 Date of Disbursement 04 / 16 / 2010  Amount of Each Disbursement this Period 1000.00  011 Category/ Type

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 166 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Committee to Elect Betsy Johnson <hr/> Mailing Address PO Box R <hr/> City Scappoose State OR Zip Code 97056 <hr/> Purpose of Disbursement P-2010 State Senate 16 OR Candidate Name Betsy Johnson <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B327726 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Committee to Elect Bill Kennemer <hr/> Mailing Address 21041 S Highway 99 East <hr/> City Oregon City State OR Zip Code 97045 <hr/> Purpose of Disbursement P-2010 State House 39 OR Candidate Name Bill Kennemer <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B327720 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Tina Kotek <hr/> Mailing Address 2209 N Schofield St <hr/> City Portland State OR Zip Code 97217 <hr/> Purpose of Disbursement P-2010 State House 44 OR Candidate Name Tina Kotek <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> B327718 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2000.00

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 167 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) Committee to Elect Frank Morse</p> <p>Mailing Address 3616 NW Eagle View Drive</p> <p>City Albany State OR Zip Code 97321</p> <p>Purpose of Disbursement P-2010 State Senate 08 OR</p> <p>Candidate Name Frank Morse</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B327728 <b>Date of Disbursement</b> 04 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Committee to Elect Nancy Nathanson</p> <p>Mailing Address PO Box 41895</p> <p>City Eugene State OR Zip Code 97404</p> <p>Purpose of Disbursement P-2010 State House 13 OR</p> <p>Candidate Name Nancy Nathanson</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B327722 <b>Date of Disbursement</b> 04 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Mary Nolan</p> <p>Mailing Address PO Box 1686</p> <p>City Portland State OR Zip Code 97207</p> <p>Purpose of Disbursement P-2010 State House 36 OR</p> <p>Candidate Name Mary Nolan</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B327717 <b>Date of Disbursement</b> 04 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

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

2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 168 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

A.	Full Name (Last, First, Middle Initial) Committee to Elect Gene Whisnant	Transaction ID: B327721 Date of Disbursement																			
	Mailing Address P.O. Box 3563	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	1	0												
	City Sunriver State OR Zip Code 97707	Amount of Each Disbursement this Period																			
	Purpose of Disbursement P-2010 State House 53 OR	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name Gene Whisnant	011 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Friends of Jackie Winters	Transaction ID: B327725 Date of Disbursement																			
	Mailing Address PO Box 126	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	1
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0	4		1	6		2	0	1	0												
	City Salem State OR Zip Code 97308	Amount of Each Disbursement this Period																			
	Purpose of Disbursement P-2010 State Senate 10 OR	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Jackie Winters	011 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

C.	Full Name (Last, First, Middle Initial) Senate Republican Campaign Cmte	Transaction ID: B327731 Date of Disbursement																			
	Mailing Address PO Box 792	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		1	6		2	0	1	0												
	City Harrisburg State PA Zip Code 17108	Amount of Each Disbursement this Period																			
	Purpose of Disbursement State Party Cmte	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name	011 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																				
	State: District: Not Applicable																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00
2500.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 169 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) Committee to Elect Frank Burns  Mailing Address 1654 William Penn Avenue  City Johnstown State PA Zip Code 15909  Purpose of Disbursement P-2010 State House 72 PA  Candidate Name Frank Burns  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	<b>Transaction ID:</b> B327732 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 1 0  Amount of Each Disbursement this Period 250.00  011 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Anthony DeLuca for Legislature Cmte  Mailing Address 1438 Homestead Rd  City Verona State PA Zip Code 15147  Purpose of Disbursement P-2010 State House 32 PA  Candidate Name Anthony M DeLuca  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	<b>Transaction ID:</b> B327733 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 1 0  Amount of Each Disbursement this Period 500.00  011 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Friends of Lawrence Farnese  Mailing Address PO Box 22594  City Philadelphia State PA Zip Code 19110  Purpose of Disbursement P-2012 State Senate 1 PA  Candidate Name Larry Farnese  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	<b>Transaction ID:</b> B327729 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 1 0  Amount of Each Disbursement this Period 500.00  011 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 170 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

A.	Full Name (Last, First, Middle Initial) Friends of Nick Micozzie <hr/> Mailing Address P.O. Box 234 <hr/> City Clifton Heights State PA Zip Code 19018 <hr/> Purpose of Disbursement P-2010 State House 163 PA Candidate Name Nicholas A Micozzie Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B327734 Date of Disbursement 04 / 16 / 2010 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Robert Tommy Tomlinson for Senate <hr/> Mailing Address 2411 Elfreh's Alley <hr/> City Bensalem State PA Zip Code 19020 <hr/> Purpose of Disbursement P-2010 State Senate 06 PA Candidate Name Robert Tomlinson Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: B327730 Date of Disbursement 04 / 16 / 2010 <hr/> Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Democratic Party of Wisconsin <hr/> Mailing Address 110 King Street Suite 203 <hr/> City Madison State WI Zip Code 53703 <hr/> Purpose of Disbursement State Party Cmte Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable	Transaction ID: B326948 Date of Disbursement 04 / 14 / 2010 <hr/> Amount of Each Disbursement this Period 2000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 171 / 171

<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)  
GlaxoSmithKline LLC PAC (GSK PAC)

A.

Full Name (Last, First, Middle Initial)  
The Republican Party of Wisconsin

Mailing Address 148 E. Johnson St.

City Madison State WI Zip Code 53703

Purpose of Disbursement  
State Party Cmte

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Not Applicable

Transaction ID: B326949

Date of Disbursement

04 / 14 / 2010

Amount of Each Disbursement this Period

2000.00

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

2000.00

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

57500.00