

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
GlaxoSmithKline LLC PAC (GSK PAC)

ADDRESS (number and street) **1201 F St NW - Ste 480**
Check if different than previously reported. (ACC) **Washington DC 20004**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C 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 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2024 through / / 2024

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 **Edge, Heather, , ,**

Signature of Treasurer **Edge, Heather, , ,** Date / / 2024

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

GlaxoSmithKline LLC PAC (GSK PAC)

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2024"/>	<input type="text" value="26169.16"/>	<input type="text" value="26169.16"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="49317.34"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="22661.29"/>	<input type="text" value="45886.64"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="71978.63"/>	<input type="text" value="72055.80"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2536.23"/>	<input type="text" value="2613.40"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="69442.40"/>	<input type="text" value="69442.40"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

GlaxoSmithKline LLC PAC (GSK PAC)

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

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).....	6650.24	7969.87
(ii) Unitemized	16011.05	37916.77
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	22661.29	45886.64
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	22661.29	45886.64
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	22661.29	45886.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	22661.29	45886.64

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	36.23	113.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	36.23	113.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	2500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	2536.23	2613.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2536.23	2613.40

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	22661.29	45886.64
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22661.29	45886.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	36.23	113.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	36.23	113.40

**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 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Badon, Ty, Allen, ,			Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-734
Mailing Address PO Box 13398			Amount of Each Receipt this Period 100.00
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 400.00	
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Oncology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Badon, Ty, Allen, ,			Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-732
Mailing Address PO Box 13398			Amount of Each Receipt this Period 100.00
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 400.00	
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Oncology	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Benen, Sandra, E., ,			Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-556
Mailing Address PO Box 13398			Amount of Each Receipt this Period 100.00
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 400.00	
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Director SGA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Benen, Sandra, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director SGA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2024
Transaction ID : 2024021620179-554
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Bryce, Christopher, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director State Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2024
Transaction ID : 2024020118578-81
 Amount of Each Receipt this Period
 70.00
 Memo Item

C. Bryce, Christopher, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director State Government Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2024
Transaction ID : 2024021620179-81
 Amount of Each Receipt this Period
 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	240.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 29
	<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)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Cain, James, , ,			Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-726
Mailing Address PO Box 13398			Amount of Each Receipt this Period 70.00
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Resp Biologic	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cain, James, , ,			Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-724
Mailing Address PO Box 13398			Amount of Each Receipt this Period 70.00
City Durham	State NC	Zip Code 27709-3398	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Rx Account Management Resp Biologic	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Calvo, Michael, Javier, ,			Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-701
Mailing Address 1050 K St NW Ste 800			Amount of Each Receipt this Period 100.00
City Washington	State DC	Zip Code 20001-4450	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional).....▶	240.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <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)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Calvo, Michael, Javier, ,		Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-699
Mailing Address 1050 K St NW Ste 800		Amount of Each Receipt this Period 100.00
City Washington	State DC	Zip Code 20001-4450
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cavalier, Kenneth, D, ,		Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-320
Mailing Address PO Box 13398		Amount of Each Receipt this Period 70.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) District Sales Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Cavalier, Kenneth, D, ,		Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-318
Mailing Address PO Box 13398		Amount of Each Receipt this Period 70.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) District Sales Dir	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional).....▶	240.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 29
	<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)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Cloud, Monica, R, ,		Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-766
Mailing Address 1050 K St NW Ste 800		Amount of Each Receipt this Period 100.00
City Washington	State DC	Zip Code 20001-4450
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Director Federal Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Cloud, Monica, R, ,		Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-763
Mailing Address 1050 K St NW Ste 800		Amount of Each Receipt this Period 100.00
City Washington	State DC	Zip Code 20001-4450
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Director Federal Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Dagne, Haile, M, ,		Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-777
Mailing Address 1050 K St NW Ste 800		Amount of Each Receipt this Period 70.00
City Washington	State DC	Zip Code 20001-4450
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Director Policy & Reimbursement	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 29
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	13	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	12
<input type="checkbox"/>		<input type="checkbox"/>	15
<input type="checkbox"/>		<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>	17

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

A. Dagne, Haile, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW
 Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director Policy & Reimbursement
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 02 / 21 / 2024
Transaction ID : 2024021620179-774
 Amount of Each Receipt this Period 70.00
 Memo Item

B. Dally, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 Swedeland Rd
 City King Of Prussia State PA Zip Code 19406-2711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Analytical Chemistry
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 02 / 06 / 2024
Transaction ID : 2024020118578-303
 Amount of Each Receipt this Period 70.00
 Memo Item

C. Dally, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 Swedeland Rd
 City King Of Prussia State PA Zip Code 19406-2711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Analytical Chemistry
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 02 / 21 / 2024
Transaction ID : 2024021620179-301
 Amount of Each Receipt this Period 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Efantis, Amy, Jo, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP, Government Affairs and Public Poli
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2024
Transaction ID : 2024020118578-758
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. Efantis, Amy, Jo, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP, Government Affairs and Public Poli
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2024
Transaction ID : 2024021620179-756
 Amount of Each Receipt this Period
 150.00
 Memo Item

C. Endres, Jennean, Marie, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Lawyer/Attorney
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2024
Transaction ID : 2024020118578-215
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Endres, Jennean, Marie, ,		Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-214
Mailing Address 2929 Walnut Street		Amount of Each Receipt this Period 100.00
City Philadelphia	State PA	Memo Item <input type="checkbox"/>
Zip Code 19104-5054		
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Lawyer/Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Fox, Jennifer, Willis, ,		Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-292
Mailing Address PO Box 13398		Amount of Each Receipt this Period 100.00
City Durham	State NC	Memo Item <input type="checkbox"/>
Zip Code 27709-3398		
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Field Vice Pres	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Fox, Jennifer, Willis, ,		Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-290
Mailing Address PO Box 13398		Amount of Each Receipt this Period 100.00
City Durham	State NC	Memo Item <input type="checkbox"/>
Zip Code 27709-3398		
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Field Vice Pres	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 29		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14	<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input type="checkbox"/> 12 <input type="checkbox"/> 16

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. Gahamanyi, Christelle, Kayirangwa, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Brand Analytics Lead
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 06 / 2024
Transaction ID : 2024020118578-773
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Gahamanyi, Christelle, Kayirangwa, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Brand Analytics Lead
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 21 / 2024
Transaction ID : 2024021620179-770
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Graham, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 S Collegeville Rd
 City Collegeville State PA Zip Code 19426-2990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Senior Vice President Value Evidence a
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 21 / 2024
Transaction ID : 2024021620179-691
 Amount of Each Receipt this Period 62.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	262.50
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: (check only one)	PAGE 15 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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. Harbour, James, Henry, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2024
Transaction ID : 2024020118578-252
 Amount of Each Receipt this Period
 115.20
 Memo Item

B. Harbour, James, Henry, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.80

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2024
Transaction ID : 2024021620179-251
 Amount of Each Receipt this Period
 115.20
 Memo Item

C. Harter, Carie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) FVP Government Relations & Advocacy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 201.40

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2024
Transaction ID : 2024021620179-676
 Amount of Each Receipt this Period
 50.35
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	280.75
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 29
<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 of Individual (Last, First, Middle Initial) or Full Organization Name
Hill, Wanda, , ,

Mailing Address 5 Crescent Dr

City Philadelphia	State PA	Zip Code 19112-1001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) GAPP Special Projects - Secondment
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2024

Transaction ID : 2024020118578-671

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Hill, Wanda, , ,

Mailing Address 5 Crescent Dr

City Philadelphia	State PA	Zip Code 19112-1001
----------------------	-------------	------------------------

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) GAPP Special Projects - Secondment
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2024

Transaction ID : 2024021620179-669

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Lewis, Anton, D, ,

Mailing Address PO Box 13398

City Durham	State NC	Zip Code 27709-3398
----------------	-------------	------------------------

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

Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Rx Account Mgmt National MA (Sales B
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2024

Transaction ID : 2024020118578-4

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
GlaxoSmithKline LLC PAC (GSK PAC)

A. Lewis, Anton, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Rx Account Mgmt National MA (Sales B
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2024
Transaction ID : 2024021620179-4
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Liles, Carol, Ann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2024
Transaction ID : 2024020118578-68
 Amount of Each Receipt this Period
 70.00
 Memo Item

C. Liles, Carol, Ann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Sr Acct Mgr, Vaccines
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2024
Transaction ID : 2024021620179-68
 Amount of Each Receipt this Period
 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	240.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Lorber, Leah, L, ,			Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-397
Mailing Address 1050 K St NW Ste 800			Amount of Each Receipt this Period 99.68
City Washington	State DC	Zip Code 20001-4450	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Assistant General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 398.72		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lorber, Leah, L, ,			Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-395
Mailing Address 1050 K St NW Ste 800			Amount of Each Receipt this Period 99.68
City Washington	State DC	Zip Code 20001-4450	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Assistant General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 398.72		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Macrae, James, , ,			Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-399
Mailing Address 2929 Walnut Street			Amount of Each Receipt this Period 70.00
City Philadelphia	State PA	Zip Code 19104-5054	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) SVP & General Counsel US Commercia	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 280.00		

SUBTOTAL of Receipts This Page (optional).....▶	269.36
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Macrae, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) SVP & General Counsel US Commercial
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2024
Transaction ID : 2024021620179-397
 Amount of Each Receipt this Period
 70.00
 Memo Item

B. Martin, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Chief Procurement Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2024
Transaction ID : 2024020118578-711
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Martin, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Chief Procurement Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 21 / 2024
Transaction ID : 2024021620179-709
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <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. Martinez-Davis, Maria, Elena, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) President US Pharmaceuticals
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt 02 / 06 / 2024
Transaction ID : 2024020118578-728
 Amount of Each Receipt this Period 208.33
 Memo Item

B. Martinez-Davis, Maria, Elena, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 Crescent Dr
 City Philadelphia State PA Zip Code 19112-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) President US Pharmaceuticals
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 833.32

Date of Receipt 02 / 21 / 2024
Transaction ID : 2024021620179-726
 Amount of Each Receipt this Period 208.33
 Memo Item

C. Miller, Michele, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 406 and 410 Blackwell Street
 Fowler and Crowe Building
 City Durham State NC Zip Code 27701-3986
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Global Pricing & Market Access Disease
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 442.56

Date of Receipt 02 / 06 / 2024
Transaction ID : 2024020118578-441
 Amount of Each Receipt this Period 110.64
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 527.30
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 21 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Miller, Michele, M., ,		Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-439
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 110.64
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Global Pricing & Market Access Disease	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 442.56	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mott, Amanda, Grashof, ,		Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-740
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 100.00
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) VP Market Access	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Mott, Amanda, Grashof, ,		Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-738
Mailing Address 406 and 410 Blackwell Street Fowler and Crowe Building		Amount of Each Receipt this Period 100.00
City Durham	State NC	
Zip Code 27701-3986		<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) VP Market Access	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	310.64
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 OF 29
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Ramaswami, SRikant, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP, Head of US Commercial Communic
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 06 / 2024
Transaction ID : 2024020118578-736
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Ramaswami, SRikant, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) VP, Head of US Commercial Communi
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 21 / 2024
Transaction ID : 2024021620179-734
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Rancourt, Randy, Aime, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 13398
 City Durham State NC Zip Code 27709-3398
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Field Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 441.88

Date of Receipt 02 / 06 / 2024
Transaction ID : 2024020118578-516
 Amount of Each Receipt this Period 110.47
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	310.47
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 29
	<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)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Rancourt, Randy, Aime, ,			Date of Receipt
Mailing Address PO Box 13398			<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2024"/>
City Durham	State NC	Zip Code 27709-3398	Transaction ID : 2024021620179-514
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="110.47"/>
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Field Vice President	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="441.88"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Roberts, Mary, E., ,			Date of Receipt
Mailing Address 5 Crescent Dr			<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2024"/>
City Philadelphia	State PA	Zip Code 19112-1001	Transaction ID : 2024020118578-760
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="70.00"/>
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Vice President, GSK US Market Access	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Rubin, Bernard, , ,			Date of Receipt
Mailing Address 5 Crescent Dr			<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2024"/>
City Philadelphia	State PA	Zip Code 19112-1001	Transaction ID : 2024020118578-714
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Office Based Medical Affairs	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="280.47"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Rubin, Bernard, , ,		Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-712
Mailing Address 5 Crescent Dr		Amount of Each Receipt this Period 100.00
City Philadelphia	State PA	Memo Item <input type="checkbox"/>
Zip Code 19112-1001	FEC ID number of contributing federal political committee. C	
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Office Based Medical Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rutherford, Deborah, , ,		Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-104
Mailing Address PO Box 13398		Amount of Each Receipt this Period 208.33
City Durham	State NC	Memo Item <input type="checkbox"/>
Zip Code 27709-3398	FEC ID number of contributing federal political committee. C	
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Vice President, Respiratory Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 833.32	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Rutherford, Deborah, , ,		Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-104
Mailing Address PO Box 13398		Amount of Each Receipt this Period 208.33
City Durham	State NC	Memo Item <input type="checkbox"/>
Zip Code 27709-3398	FEC ID number of contributing federal political committee. C	
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Vice President, Respiratory Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 833.32	

SUBTOTAL of Receipts This Page (optional).....▶	516.66
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: (check only one)	PAGE 25 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Scott, Stephanie, Dare, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Internal Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 06 / 2024
Transaction ID : 2024020118578-775
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Scott, Stephanie, Dare, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Internal Communications
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 21 / 2024
Transaction ID : 2024021620179-772
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Strand, Stefanie, Taylor, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Congresses Oversight Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 02 / 06 / 2024
Transaction ID : 2024020118578-573
 Amount of Each Receipt this Period 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	270.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Strand, Stefanie, Taylor, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2929 Walnut Street
 City Philadelphia State PA Zip Code 19104-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Congresses Oversight Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 02 / 21 / 2024
Transaction ID : 2024021620179-571
 Amount of Each Receipt this Period 70.00
 Memo Item

B. Thevenet, Philip, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director, Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 06 / 2024
Transaction ID : 2024020118578-501
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Thevenet, Philip, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 K St NW Ste 800
 City Washington State DC Zip Code 20001-4450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GlaxoSmithKline LLC Occupation (for Individual) Director, Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 21 / 2024
Transaction ID : 2024021620179-499
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	270.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Tjaden, Kristen, , ,			Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-698
Mailing Address PO Box 13398			Amount of Each Receipt this Period 52.09
City Durham	State NC	Zip Code 27709-3398	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Public Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.36		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Weinberg, Harry, , ,			Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-210
Mailing Address PO Box 13398			Amount of Each Receipt this Period 75.00
City Durham	State NC	Zip Code 27709-3398	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Field Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Weinberg, Harry, , ,			Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-209
Mailing Address PO Box 13398			Amount of Each Receipt this Period 75.00
City Durham	State NC	Zip Code 27709-3398	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC		Occupation (for Individual) Field Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional).....	202.09
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: (check only one)	PAGE 28 OF 29
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Woodhouse, Jeffrey, C., ,		Date of Receipt MM / DD / YYYY 02 / 06 / 2024 Transaction ID : 2024020118578-727
Mailing Address PO Box 13398		Amount of Each Receipt this Period 70.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Woodhouse, Jeffrey, C., ,		Date of Receipt MM / DD / YYYY 02 / 21 / 2024 Transaction ID : 2024021620179-725
Mailing Address PO Box 13398		Amount of Each Receipt this Period 70.00
City Durham	State NC	Zip Code 27709-3398
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) GlaxoSmithKline LLC	Occupation (for Individual) Government Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....	140.00
TOTAL This Period (last page this line number only).....	6650.24

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"/> 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)

Full Name (Last, First, Middle Initial)

A. Glenn F. IVEY For Congress

Mailing Address PO Box 85

City
Bladensburg

State
MD

Zip Code
20710

Purpose of Disbursement
2024 Primary

Category/
Type

Candidate Name

Ivey, Glenn, Frederick, ,

Office Sought: House
 Senate
 President

Disbursement For: 2024
 Primary General
 Other (specify) ▼

State: MD District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		29		2024

FEC Identification Number

Transaction ID : 582249CA91E

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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