

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 01 01 2007 through 01 31 2007

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

Type or Print Name of Treasurer Marvin White

Signature of Treasurer Electronically Filed by Marvin White Date 02 16 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		426778.86
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	426778.86									
(c) Total Receipts (from Line 19)	93888.27	93888.27								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	520667.13	520667.13								
7. Total Disbursements (from Line 31)	34140.00	34140.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	486527.13	486527.13								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 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	4231.60	4231.60
(i) Itemized (use Schedule A)	89656.67	89656.67
(ii) Unitemized	93888.27	93888.27
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	93888.27	93888.27
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))	93888.27	93888.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	93888.27	93888.27

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	290.00	290.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	290.00	290.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17000.00	17000.00
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	250.00	250.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	250.00	250.00
29. Other Disbursements.....	16600.00	16600.00
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))..	34140.00	34140.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	34140.00	34140.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	93888.27	93888.27
34. Total Contribution Refunds (from Line 28(d))	250.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	93638.27	93638.27
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	290.00	290.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	290.00	290.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 18
	<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)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr David C Dennison Mailing Address 6726 W. Stonegate Dr. City State Zip Code Zionsville IN 46077-8555 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7 Transaction ID: 25484128 Amount of Each Receipt this Period 0.00
Name of Employer: Eli Lilly and Company Occupation: Team Leader-Mfg-Bulk Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼: -200.00		[MEMO ITEM] Refund(s) on Schedule B Totaling \$250.00 This changes the YTD Total to \$-200.00

B. Full Name (Last, First, Middle Initial) Mr Derica W Rice Mailing Address 11065 Sedgemoor Circle City State Zip Code Carmel IN 46032-9195 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR1550150616499 Amount of Each Receipt this Period 250.00
Name of Employer: Eli Lilly and Company Occupation: Sr Vice President/CFO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼: 250.00		P/R Deduction (\$250.00 Monthly)

C. Full Name (Last, First, Middle Initial) Mr Joseph B Kelley Mailing Address 1817 Horseback Trail City State Zip Code Vienna VA 22182-1813 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Transaction ID: PR371907516499 Amount of Each Receipt this Period 253.46
Name of Employer: Eli Lilly and Company Occupation: Vice President-State/Fed Govt Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼: 253.46		P/R Deduction (\$253.46 Monthly)

SUBTOTAL of Receipts This Page (optional)	503.46
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name (Last, First, Middle Initial) A. Dr Frank M Deane		Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y </div>
Mailing Address 7345 North Washington Blvd.		Transaction ID: PR372019016499
City Indianapolis State IN Zip Code 46240-3087	Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$250.00 Monthly)
Name of Employer Eli Lilly and Company	Occupation VP-Quality	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>	

Full Name (Last, First, Middle Initial) B. Mr Gino Santini		Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y </div>
Mailing Address 13585 Brentwood Lane		Transaction ID: PR372049916499
City Carmel State IN Zip Code 46033-9607	Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">244.60</div>	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$244.60 Monthly)
Name of Employer Eli Lilly and Company	Occupation Sr VP-Corp Strategy & Policy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">244.60</div>	

Full Name (Last, First, Middle Initial) C. Mr Peter J Johnson		Date of Receipt <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> M M / D D / Y Y Y Y Y </div>
Mailing Address 16181 Stony Ridge Drive		Transaction ID: PR372116316499
City Noblesville State IN Zip Code 46060-8769	Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">208.50</div>	
FEC ID number of contributing federal political committee. C		P/R Deduction (\$208.50 Monthly)
Name of Employer Eli Lilly and Company	Occupation Exec Dir-Corporate Strategy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">208.50</div>	

SUBTOTAL of Receipts This Page (optional) ▶	<div style="border: 1px solid black; padding: 2px;">703.10</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Dr James E Audia		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR372336916499	
Mailing Address 1 Stone Wall Lane		Amount of Each Receipt this Period 215.44	
City Zionsville	State IN	Zip Code 46077-8371	P/R Deduction (\$215.44 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 215.44	
Name of Employer Eli Lilly and Company	Occupation Distinguished Lilly Scholar		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.44		

Full Name (Last, First, Middle Initial) B. Dr Andrew M Dahlem		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR372409516499	
Mailing Address 9312 Timberline Drive		Amount of Each Receipt this Period 293.84	
City Indianapolis	State IN	Zip Code 46256-4721	P/R Deduction (\$293.84 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 293.84	
Name of Employer Eli Lilly and Company	Occupation VP-LRL Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 293.84		

Full Name (Last, First, Middle Initial) C. Mr Michael C Heim		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR372442616499	
Mailing Address 4584 Chase Oak Court		Amount of Each Receipt this Period 250.00	
City Zionsville	State IN	Zip Code 46077-9652	P/R Deduction (\$250.00 Monthly)
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00	
Name of Employer Eli Lilly and Company	Occupation VP-Information Technology/CIO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	759.28
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 18
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Mr Newton Crenshaw		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 4560 South 975 East		Transaction ID: PR372601416499	
City Zionsville	State IN	Zip Code 46077-9554	Amount of Each Receipt this Period _____ 315.22
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation VP-Communications/Public Relat		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 315.22		
		P/R Deduction (\$315.22 Monthly)	

Full Name (Last, First, Middle Initial) B. Mr Sidney Taurel		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 525 Somerset West Drive		Transaction ID: PR373260616499	
City Indianapolis	State IN	Zip Code 46260	Amount of Each Receipt this Period _____ 416.00
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation Chairman of the Board/CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 416.00		
		P/R Deduction (\$416.00 Monthly)	

Full Name (Last, First, Middle Initial) C. Ms Elizabeth H Klimes		Date of Receipt M M / D D / Y Y Y Y Y _____	
Mailing Address 5843 Circle T Drive		Transaction ID: PR373754116499	
City Greenwood	State IN	Zip Code 46143-8841	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Eli Lilly and Company	Occupation VP-Six Sigma		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ _____ 250.00		
		P/R Deduction (\$250.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	_____ 981.22
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 18
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. Mr Robert Allen Armitage		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR374312716499
Mailing Address 525 Lockerbie Circle N. Drive		Amount of Each Receipt this Period 416.00
City Indianapolis State IN Zip Code 46202		
FEC ID number of contributing federal political committee. C		
Name of Employer Eli Lilly and Company	Occupation Sr VP/General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.00	
		P/R Deduction (\$416.00 Monthly)

Full Name (Last, First, Middle Initial) B. Dr John C Lechleiter		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR374440616499
Mailing Address 5805 White Oak Court		Amount of Each Receipt this Period 416.00
City Indianapolis State IN Zip Code 46220-5229		
FEC ID number of contributing federal political committee. C		
Name of Employer Eli Lilly and Company	Occupation President/COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 416.00	
		P/R Deduction (\$416.00 Monthly)

Full Name (Last, First, Middle Initial) C. Ms Deirdre P Connelly		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR374818916499
Mailing Address 519 East Vermont Street		Amount of Each Receipt this Period 243.34
City Indianapolis State IN Zip Code 46202-3637		
FEC ID number of contributing federal political committee. C		
Name of Employer Eli Lilly and Company	Occupation President - US Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.34	
		P/R Deduction (\$243.34 Monthly)

SUBTOTAL of Receipts This Page (optional) ▶	1075.34
TOTAL This Period (last page this line number only) ▶	

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

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

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

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

Mailing Address 1200 Villamay Boulevard

City State Zip Code
Alexandria VA 22307-2048

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
209.20

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

Transaction ID: PR375033516499

Amount of Each Receipt this Period
209.20

P/R Deduction (\$209.20 Monthly)

SUBTOTAL of Receipts This Page (optional)	▶	209.20
TOTAL This Period (last page this line number only)	▶	4231.60

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. CHC BOLD PAC		Transaction ID: 25394168 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address 1831 Bay Street, NE		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003	Contribution	
Purpose of Disbursement Contribution Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Friends Of Mary Landrieu Inc		Transaction ID: 25325114 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address 607 14th Street Nw Suite 800		Amount of Each Disbursement this Period 1500.00
City Washington State DC Zip Code 20005	Contribution	
Purpose of Disbursement Contribution Candidate Name Sen. Mary Landrieu		011 Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 2		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Kilpatrick for United States Congress		Transaction ID: 25394170 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7
Mailing Address PO Box 32175		Amount of Each Disbursement this Period 1000.00
City Detroit State MI Zip Code 48232	Contribution	
Purpose of Disbursement Contribution Candidate Name CAROLYN KILPATRICK		011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 15		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Coleman For Senate 08		Transaction ID: 25325113 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7	
Mailing Address 7300 Hudson Blvd, Suite 270A		Amount of Each Disbursement this Period 2500.00 Contribution	
City St Paul State MN Zip Code 55128	Amount of Each Disbursement this Period 2500.00 Contribution		
Purpose of Disbursement Contribution Candidate Name Sen. Norm Coleman			011 Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 2			Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Rangel for Congress		Transaction ID: 25286389 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 7	
Mailing Address P O Box 5577		Amount of Each Disbursement this Period 2500.00 Contribution	
City New York State NY Zip Code 10027	Amount of Each Disbursement this Period 2500.00 Contribution		
Purpose of Disbursement Contribution Candidate Name CHARLES RANGEL			011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15			Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Friends of John Boehner		Transaction ID: 25325115 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7	
Mailing Address 7908-12 Cincinnati Dayton Road		Amount of Each Disbursement this Period 2500.00 Contribution	
City West Chester State OH Zip Code 45069	Amount of Each Disbursement this Period 2500.00 Contribution		
Purpose of Disbursement Contribution Candidate Name John Boehner			011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 8			Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	7500.00
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)

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

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

Full Name (Last, First, Middle Initial) A. Webb For Senate		Transaction ID: 25286525 Date of Disbursement 01 / 16 / 2007
Mailing Address PO Box 17427		Amount of Each Disbursement this Period 5000.00
City Arlington State VA Zip Code 22216	Purpose of Disbursement Contribution Contribution 011 Category/Type	
Candidate Name Mr. James Webb	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 2	Contribution
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Donna Christensen Campaign		Transaction ID: 25394167 Date of Disbursement 01 / 31 / 2007
Mailing Address PO Box 5197		Amount of Each Disbursement this Period 1000.00
City St. Croix State VI Zip Code 00823	Purpose of Disbursement Contribution Contribution 011 Category/Type	
Candidate Name Del. Donna Christensen	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VI District: 1	Contribution
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ►

6000.00

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

17000.00

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

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FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Mr David C Dennison		Transaction ID: 25285727 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 7	
Mailing Address 6726 W. Stonegate Dr.		Amount of Each Disbursement this Period 250.00	
City Zionsville	State IN	Zip Code 46077-8555	Refund of Contributions
Purpose of Disbursement Refund of Contributions		010 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	250.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Friends of Valerie Brown for Supervisor		Transaction ID: 25325117 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address PO Box 538		Amount of Each Disbursement this Period 250.00
City Kenwood State CA Zip Code 95452	Valerie Brown, County Supervisor CA	
Purpose of Disbursement Valerie Brown, County Supervisor CA		
Candidate Name Valerie Brown		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of John J Millner		Transaction ID: 25325119 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address PO Box 88801		Amount of Each Disbursement this Period 2000.00
City Carol Stream State IL Zip Code 60188-0801	John Millner, STATE SENATE IL	
Purpose of Disbursement John Millner, STATE SENATE IL		
Candidate Name John J Millner		011 Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 28	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Greater Indianapolis Republican Finance Committee		Transaction ID: 25232996 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 0 7
Mailing Address 120 East Vermont		Amount of Each Disbursement this Period 2000.00
City Indianapolis State IN Zip Code 46204	Contribution	
Purpose of Disbursement Contribution		
Candidate Name		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4250.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)
ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Todd Rokita Election Committee		Transaction ID: 25394246 Date of Disbursement 01 / 31 / 2007
Mailing Address PO Box 44125		Amount of Each Disbursement this Period 1000.00
City Indianapolis State IN Zip Code 46244	Purpose of Disbursement Todd Rokita, SECRETARY OF STATE IN Candidate Name Todd Rokita Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Todd Rokita, SECRETARY OF STATE IN

Full Name (Last, First, Middle Initial) B. Friends of Bobby Jindal		Transaction ID: 25394174 Date of Disbursement 01 / 31 / 2007
Mailing Address PO Box 7308		Amount of Each Disbursement this Period 2000.00
City Metairie State LA Zip Code 70010	Purpose of Disbursement BOBBY JINDAL, GOVERNOR LA Candidate Name BOBBY JINDAL Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District:	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	BOBBY JINDAL, GOVERNOR LA

Full Name (Last, First, Middle Initial) C. Howard C. Walker for State Representative		Transaction ID: 25456304 Date of Disbursement 01 / 30 / 2007
Mailing Address PO Box 1508		Amount of Each Disbursement this Period -150.00
City Traverse City State MI Zip Code 49685	Purpose of Disbursement Void - Check Written - 10/29/2006 Candidate Name MI Rep. Howard Walker Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 10	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ 2006 MI General	Void - Check Written - 10- /29/2006

SUBTOTAL of Disbursements This Page (optional) ▶	2850.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. Friends of Dave Hunt		Transaction ID: 25232997 Date of Disbursement 01 / 05 / 2007
Mailing Address P.O. Box 68445		Amount of Each Disbursement this Period 1000.00
City Milwaukie State OR Zip Code 97268	Purpose of Disbursement Dave Hunt, STATE HOUSE 40th OR Candidate Name OR Rep. Dave Hunt Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 40	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Dave Hunt, STATE HOUSE 40th OR

Full Name (Last, First, Middle Initial) B. Commonwealth Victory Fund		Transaction ID: 25232994 Date of Disbursement 01 / 05 / 2007
Mailing Address 1108 E Main Street 2nd Floor		Amount of Each Disbursement this Period 5000.00
City Richmond State VA Zip Code 23219	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

Full Name (Last, First, Middle Initial) C. Dominion Leadership Trust PAC		Transaction ID: 25232995 Date of Disbursement 01 / 05 / 2007
Mailing Address 106 Carter Street		Amount of Each Disbursement this Period 2500.00
City Falmouth State VA Zip Code 22404	Purpose of Disbursement Contribution Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution

SUBTOTAL of Disbursements This Page (optional)	8500.00
TOTAL This Period (last page this line number only)	15600.00